Occupational Safety and Health Administration Tarrytown Area Office 660 White Plains Road 4th Floor Tarrytown NY 10591-5107 (914) 524-7510 Fax: (914) 524-7515



OSHA Website Address: http://www.osha.gov

July 8, 1999



Dear Mr.

As a result of the above indicated OSHA inspection, we previously sent you a citation indicating violations of the Occupational Safety and Health Act as well as a letter requesting verification of abatement. A review of the abatement letter you sent to us indicates that the information included in the letter does not sufficiently assure abatement of some of the violations. Therefore, we request that you send us a supplementary abatement with additional information as explained below. If this supplementary abatement letter is not received in our office by July 19, 1999, a FOLLOW-UP INSPECTION of your workplace may be scheduled, which could result in additional citations with additional accompanying proposed penalties.

The violations for which additional abatement information is needed are as follows:

Citation	Item	Current Deficiency and Needed Information
1	1a	The violation concerns the requirement that you, the employer, must perform a complete assessment of all operations at the site and identify appropriate personal protective equipment required to be used. You must maintain a certification that you performed this assessment. You abatement letter describes the availability of personal protective equipment and employee training. A statement that adequately assures abatement of this violation must include the assertion that you have performed the hazard assessment required by 29 CFR 1910.132(d)(1) and that you are maintaining the written hazard assessment certification document required by 29 CFR 1910.132(d)(2).
1	1c	The violation concerns the requirement that employees where personal protective equipment when necessary. Your abatement letter describes the availability and personal protective equipment, the training of employees, and employees' knowledge concerning personal protective equipment. A statement that adequately assures abatement of this violation

Citation Item Current Deficiency and Needed Information

must include the assertion that employees use the appropriate personal protective equipment whenever necessary by virtue of the operations they are performing.

- The violation concerns the requirement the you, the employer, accurately measure employee exposure to noise and maintain these records. Your abatement letter addresses the use of hearing protection. A statement that adequately assures abatement of this violation must include the assertion that you have measured employee noise exposure and are maintaining the noise monitoring records. [NOTE: The noise measurements must establish noise levels representative of the highest noise level exposure employees are subjected to during operations.]
- This violations concerns the requirement that you, the employer, establish a written respirator program that includes the elements listed in 29 CFR 1910.134(c). You abatement letter states that you have provided or made accessible to employees certain information. A statement that adequately assures abatement of this violation must include the assertion that you have developed and are maintaining a written respirator program that includes all applicable elements as required by the regulation.
- This violation concerns the requirement that employees who use respirators are provided medical evaluations in accordance with 29 CFR 1910.134(e). Your abatement letter states that you have posted a notice that medical evaluations will be given to employees. A statement that adequately assures abatement of this violation must include the assertion that all affected employees have received the medical evaluation as specified in the regulation.
- This violation concerns the requirement that you, the employer, must develop and implement a written hazard communication program that includes the elements specified in 29 CFR 1910.1200(e). Your abatement letter provides information on abatement of other requirements of the regulation. A statement that adequately assures abatement of this violation must include the assertion that you have developed and are maintaining a written hazard communication program that includes all applicable elements as required by the regulation.

If the above violations have been corrected, please provide, on the last page of this letter, the additional information requested. Then endorse and date this letter and return it to the Area Office. If you have any questions or require additional information, please write or call this office and ask for the Area Director.

Sincerely,

'Area Director

There are 2 remaining items without abatement verification. The employer has not yet had the respirator medical evaluation. Mr stated that the employee is getting married in about a week and has been absent from work while pre-marriage arrangements are in progress. Therefore, the evaluation cannot occur until the employee returns form his honeymoon. Since he will probably not use his respirator while on the honeymoon, we probably can't do anything more at present.

Mr. ___ said that he contacted somebody to do the noise survey, but he has identified a new hand tool that the manufacturer claims polishes the marble at a greatly reduces noise level. He says the new tool will arrive in a week. It seems pointless to require a noise survey until the new equipment arrives.

I requested the Mr.

confirm the reasons for the delays in writing.

CASE AUDIT REPORT

Criteria File: pmdm	Fetab Name	08/03/09 00:36	00:36						Inspection #	••	-	Page:
	Site Address	SS							Opt. Inspection Supervisor ID CSMO ID Inspection Type	*		•
	Mail Address:	:ss:							Entry Dt Close Conf Dt Infor Conf Date PMA STATUS	: 01/07/99 : 03/24/99 : : 04/12/99		
	Contl Corp								PMA DATE Contest(active) Final Order Case Close Dt	 		
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List the SPECIFIC method of correction for each item on the citation and the date of correction. They must wear pot and will be fined if they don't use. rare extorcing this matter to the one man shop. written respiratory program and have told employee (1) exceptable range for a / D wan shop t **Endorsement** All cited violations have been corrected/abated. (Date) (Signati

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301460580

Citation # /, Item #/Awas corrected on (date) (4/14/9)
Explain how condition(s) were corrected.
_ perphot eg was @ Site @ time of inspection.
gard pp. eq. was adequate. There were ear + eye protection for ea. Cmy
- Have spoken w employees in pastedid again (4/16/95) the (2) Employees are trained have full Knowledge on how to use equipmt.
Citation # /, Item #/Bwas corrected on (date)
Explain how condition(s) were corrected.
- The (2) employees are in their 40'S & very aware of Badargers in NOT
using their personal prot. eq.
They have been told again by the company to use their pers. prot. eg.
- Co. posted watrying notice to 2 notice. Citation #2, Item #2 was corrected on (date)
Explain how condition(s) were corrected.
- Hearing prot has been in shop for years.
- The (2) employees were trained agains (41 kd99) They are in their 405 + Khow the
clargers of not wearing hearing acrises.
Citation # 1, Item # 1 was corrected on (date)
Explain how condition(s) were corrected.
- provided into to the (2) employees
- Mosfel Appendix) of 290 FR
- fasted withou native to Es can ployees
- Posted Nation to give Medicaleval.

301460580

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= MSDS sheets a shop.
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fraincel employees Before inspection as well as a feet Citation #, Item # was corrected on (date)
Explain how condition(s) were corrected.
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Explain how condition(s) were corrected.
Citation #, Item # was corrected on (date)
Explain how condition(s) were corrected.

3pm

April 15th, 1999

US Dept of Labor Occupational Safety and Health Administration 880 White Plains Rd - 4th Floor Tarrytown, NY 10591-5107

ATTN: Mr. Ms

RE: Informal Settlement Agreement Osha NO. 301460580

Dear Mr.

and Ms.

I am in receipt of your proposed informal settlement agreement for the above captioned OSHA file of which I am faxing to your attention with my signature and dated today, 4/15/99.

However, for the record I wish to recap the conversation which took place between Mr and myself on 4/12/99. The informal meeting conducted via phone lasted for approximately two hours. During this meeting it was stated to Mr. that I clearly am not in agreement with the inspection findings which ultimately the citations come from.

Mr. was the OSHA inspector whom inspected my operation in January of 1999.

This inspection was the outcome of a local person who filed a complaint with OSHA to harrass me and his tactics have worked. Your agency was used as a stepping stone and it worked.

To harrass a small operation such as mine is totally ridiculous but nonetheless has been done.

Taxpayers money which is spent in this fruitless manner would be better spent elsewhere. The government should use its agencies and resources to inspect and subsequently correct problems which are widespread and extensive such as sweatshops, etc.

The two men which my operation consists of have been provided with personal protection equipment for the years they have been working for our company. And may I add there has not been any injury loss record as of yet. Obviously we have been conducting ourselves in the proper manner with keeping safety hazards in mind.

I have agreed to the amended settlement amount of \$450.00 and have signed your informal

settlement agreement which I am sending you via fax and the original via regular mail.

Trusing my position concerning this matter is clear.

Very truly your

cc: Congressman

- US Congress Radburn Bldg. Washington, DC

U.S. DEPARTMENT OF LABOR OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

In the Matter of

OSHA No.(s): 301460580

INFORMAL SETTLEMENT AGREEMENT

The undersigned Employer and the undersigned Occupational Safety and Health Administration (OSHA), in settlement of the above citation(s) and penalties which were issued on 03/24/99, hereby agree as follows:

- 1. The Employer agrees to correct the violations as cited in the above citations or as amended below.
- 2. The Employer agrees to pay the proposed penalties, if any, as issued with the above citation(s), or, if amended by this agreement, as amended below.
- 3. The Employer and OSHA agree that the following citations and penalties, if any, are not being amended:

Cit 02 Item 001 Cit 02 Item 003 Cit 02 Item 004 Cit 02 Item 005 Cit 02 Item 006 Cit 02 Item 007 Cit 02 Item 008

Cit 02 Item 009 Cit 02 Item 010

Cit 02 Item 011

Cit 02 Item 012 Cit 02 Item 013

Cit 02 Item 014

4. OSHA agrees that the following citations and penalties are being amended as shown below:

Cit 01 Item 001 a - Penalty reduced from \$450.00 to \$270.00.

Cit 01 Item 001 b

Cit 01 Item 001 c

Cit 02 Item 002 - Penalty reduced from \$300.00 to \$180.00, and abatement date amended to read 05/26/99.

Total Penalty reduced from \$750,00 to \$450,00.

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Default of the penalty schedule contained in this agreement will cause the agreement to be considered null and void and the penalty due will revert back to the original amount of \$750.00.

- 5. The employer, by signing this informal settlement agreement, hereby waives its rights to contest the above citation(s) and penalties, as amended in paragraph 4 of this agreement.
- 6. The employer agrees to immediately post a copy of this Settlement Agreement in a prominent place at or near the location of the violation(s) referred to in paragraph 4 above. This Settlement Agreement must remain posted until the violations cited have been corrected, or for 3 working days (excluding weekends and Federal Holidays), whichever is longer.
- 7. The employer agrees to continue to comply with the applicable provisions of the Occupational Safety and Health Act of 1970, and the applicable safety and health standards promulgated pursuant to the Act.
- 8. By entering into this agreement, the employer does not admit that it violated the cited standards for any litigation or purpose other than a subsequent proceeding under the Occupational Safety and Health Act.

imployer agrees to use the service of the New York Consultation Service to the worksite(s) within one year of the signing of this agreement.

10. The employer agrees to develop and implement a written safety and health program and pro retaining concerning said program to all employees. A copy of the program small be provided to all employees.

For Occupational Safety
And Health Administration

(signature and date)

For The Employer (signature and date)

2

April 15th, 1999

US Dept of Labor Occupational Safety and Health Administration 600 White Plains Rd - 4th Floor Tarrytown, NY 10591-5107

ATTN: Mr

RE: informal Settlement Agreement Osha NO. 301460580

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I have agreed to the amended settlement amount of \$450.00 and have signed your informal

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Trusing my position concerning this matter is clear.

Very truly yours,

cc: Congressman

· US Congress Radburn Bldg. Washington, DC

TRANSMISSION REPORT

PHONE/TTI NO. DATE AND TIME 9/1010333#/ 04-12 05:46PM

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TARRYTOWN AREA OFFICE

INFORMAL CONFERENCE NOTES

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INFORMAL CONFERENCE NOTES CONTINUED: Cit 1 - Ilen 16 - Inspruction to wear eye protection has been given for many years (2) employees were provided - (1) eyewen/(1) goggle (Stated that employee cutting marble was not player negligence, M2116 explana y the employ El must enforce the stated that 1910.95(1): - # 之; toing "hovever you're 85 dBA: MZIIG gre he sampled the Er's would be found to excess of 87dBA-2INFORMAL CONFERENCE NOTES CONTINUED: 1910.134 #10; 29CFR 1910. 1200(R)(1)

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U.S. Department of Labor Occupational Safety and Health Administration

Inspection Number. _01460580 Inspection Dates: 01/07/99 - 03/24/99 **Issuance Date:**

03/24/99



Citation and Notification of Penalty

Company Name: **Inspection Site:**



The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury resulting from an accident.

Citation 1 Item 1a Type of Violation: Serious

29 CFR 1910.132(d)(1): The employer did not assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment (PPE):

On or about January 25, 1999.

a) Cutting and Polishing Room:

The employer did not perform a comprehensive hazard assessment of the workplace, as outlined in Appendix B to 29 CFR 1910 - Subpart I, to determine the proper personal equipment that must be used to protect employees from the identified hazards. Examples of hazards present in the workplace include, but are not limited to, the following hazards.

During the cutting of marble slabs with the 16" stone cutting blade, employees do not wear eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

ABATEMENT NOTE: As part of the hazard assessment procedures mandated by 29 CFR 1910.132(d) and (f), employers must:

- 1) select and ensure the use of personal protective equipment that will adequately protect affected employees from the identified hazards;
- 2) communicate selection decisions to each affected employee;
- 3) select personal protective equipment that properly fits each affected employee;
- 4) train employees in the proper use of their personal protective equipment, including all the topics listed in 29 CFR 1910.132 (f)(1); and
- 5) certify in writing that the hazard assessment and required training was performed.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

U.S. Department of Labo Occupational Safety and Health Administration

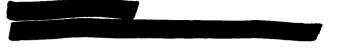
Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



The hazard assessment certification must include an identification of the workplace(s) covered by the assessment, the person certifying that the evaluation has been performed, the date(s) of the hazard assessment(s), and a statement that identifies the document as the personal protective equipment hazard assessment certification.

The training certification must include the name of each employee trained, the date(s) of the training, and a statement that identifies the document as the personal protective equipment training certification.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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U.S. Department of Lab Occupational Safety and Health Administration

Inspection Number. 301460580 Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: **Inspection Site:**



Citation 1 Item 1b Type of Violation: Serious

29 CFR 1910.132(f)(1): The employer did not provide training to each employee who is required to use personal protective equipment.

On or about January 25, 1999.

a) Cutting and Polishing Room:

Employees were not adequately trained in the use of personal protective equipment, as demonstrated by the following condition.

During the cutting of marble slabs with the 16" stone cutting blade, employees do not wear eve protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

Failure of employees to recognize the need to wear eye protection with side protection during the cutting operation demonstrates the lack of training of the employees.

ABATEMENT NOTE: At a minimum, employees must be trained in the following: when personal protective equipment is necessary, what personal protective equipment is necessary, how to properly don, doff, adjust, and wear personal protective equipment, the limitations of the personal protective equipment, and the proper care, maintenance, useful life and disposal of the personal protective equipment.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Adated

Occupational Safety and Health Administration

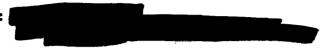
Inspection Number: 1460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 1 Item 1c Type of Violation: Serious

29 CFR 1910.133(a)(2):Employer did not ensure that each affected employee used eye protection that provided side protection when there was a hazard from flying objects:

On or about January 25, 1999.

a) Cutting and Polishing Room:

During the cutting of marble slabs with the 16" stone cutting blade, employees were not wearing eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Abated:

04/19/99

U.S. Department of Labor Occupational Safety and Health Auministration

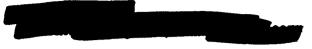
Inspection Number: 01460580
Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 1 Type of Violation: Other

29 CFR 1903.2(a)(1): The OSHA notice was not posted to inform employees of the protections and obligations provided for in the Act:

On or about January 9, 1999.

At the Establishment:

The OSHA notice was not posted.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

Date By Winch Violation Must be Abated: Corrected During Inspection
Proposed Penalty: \$ 0.00

Occupational Safety and Health Auministration

Inspection Number)1460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 2 Type of Violation: Other

29 CFR 1910.95(d)(1): A representative monitoring program was not developed and implemented when information indicated that an employee's exposure may equal or exceed an 8-hour time-weighted average of 85 dBA:

On or about January 26, 1999.

a) At the Establishment

On January 26, 1999, employees were monitored for noise exposure while performing shaping and polishing operations. During shaping operations, employees were exposed to noise levels equal to approximately 100 dBA [decibels as measured on the A weighted scale]. During polishing operations, employees were exposed to noise levels between 85 dBA and 90 dBA. Based upon information obtained during the investigation, employees periodically perform these operations long enough during one eight hour shift to exceed the 8-hour time-weighted average of 85 dBA. The employer has not established a representative noise monitoring program to evaluate employees' noise exposure.

ABATEMENT NOTE: Because the monitoring program must identify employees required to be included in a hearing conservation program, the monitoring must be conducted under conditions that measure the employees' maximum noise exposure during operations. Therefore, the monitoring must be done during those jobs that entail the largest amounts of shaping and polishing operations.

If noise monitoring indicates that employees are exposed to average noise levels in excess of 85 dBA, an effective hearing conservation program in compliance with 29 CFR 1910.95(c)-(n) and its appendices must be implemented. In addition to noise monitoring, such a program must include the following.

- (1) Provision a selection of hearing protectors from which employees can choose. The hearing protection must be individually fitted and must provide adequate noise reduction as determined by its Noise Reduction Rating (NRR). Evaluation of the adequacy of the hearing protection must be calculated according to an approved NIOSH method. Employee use of hearing protection when required by the noise standard must be enforced.
- (2) Training and education of each overexposed employee. Training must include the following topics:
 a) the effects of noise on hearing; b) the purpose of hearing protectors; c) the advantages,
 disadvantages, and attenuation of the various types of hearing protectors; d) the selection, fitting,
 use and care of the hearing protectors; and e) the purpose of and procedures for audiometric
 testing.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

Occupational Safety and Health Administration

Inspection Number: 1460580

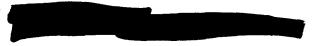
Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



- (3) Institution of a medical monitoring program. This program must include following elements: a) obtaining a baseline audiogram for overexposed employees as soon as possible; b) obtaining additional audiograms annually; and c) evaluating the audiograms to determine if it is valid and if a threshold hearing shift has occurred. Employees must avoid exposure to workplace noise for at least 14 hours before audiometric testing for the baseline audiogram.
- (4) Procedures for preventing further occupational hearing loss whenever an employee has suffered a standard threshold shift (which is defined as an average hearing loss greater than 10 decibels at the frequencies of 2000, 3000, and 4000 Hz). At a minimum, employees must be informed that they have suffered a standard threshold shift, they must be retrained, and the adequacy of the their hearing protection must be reevaluated.
- (5) Maintenance of noise monitoring and audiometric testing records, as required by the "Access to Employee Exposure and Medical Records" regulation.

When average noise levels exceed 90 dBA, the hearing conservation program must also include implementation of all feasible engineering, work practice, and administrative controls needed to reduce employee noise exposure under 90 dBA.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Occupational Safety and Health Aumanistration

Inspection Number

Issuance Date:

1460580

Inspection Dates: 01/07/99 - 03/24/99 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 3 Type of Violation: Other

29 CFR 1910.110(e)(4)(iii): Permanent and removable fuel containers were not securely mounted to prevent jarring loose, slipping, or rotating:

January 25, 1999

a) At the Establishment:

The propane tank used to fuel the forklift truck was not securely mounted to the forklift truck since the index pin was in place to prevent rotation of the tank.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

Date By Which Violation Must be Abated Corrected	
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Proposed Penalty:	

Occupational Safety and Health Administration

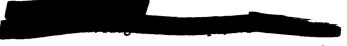
Inspection Number: J1460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 4 Type of Violation: Other

29 CFR 1910.134(c)(2)(i): Where respirator use is not required and the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not determine that such respirator use does not in itself create a hazard and the employer did not provide the respirator users with the information contained in Appendix D of 29 CFR 1910.134 ("Information for Employees Using Respirators When Not Required Under the Standard"):

On or about January 25, 1999.

At the Establishment:

An employee uses a ½ facepiece cartridge respirator while preparing and installing products.

- a) The employer did not provide the employee with a copy of Appendix D of 29 CFR 1910.134.
- b) The employer did not determine that respirator use does not in itself create a hazard by virtue of the failure of the employer to provide a medical evaluation as specified by 29 CFR 1910.134(e).

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Occupational Safety and Health Agministration

Inspection Number: 1460580 Inspection Dates: 01/07/99 - 03/24/99 **Issuance Date:**

03/24/99



Citation and Notification of Penalty

Company Name: **Inspection Site:**



Citation 2 Item 5 Type of Violation: Other

29 CFR 1910.134(c)(2)(ii): Where respirator use is not required but the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not establish and implement those elements of a written respiratory program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator; and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user:

On or about January 25, 1999.

At the Establishment:

a) An employee uses a ½ facepiece cartridge respirator while preparing and installing products. The employer did not establish a written respirator program.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Occupational Safety and Health Administration

Inspection Number Inspection Dates: 01/07/99 - 03/24/99

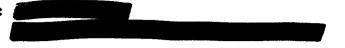
1460580

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 6 Type of Violation: Other

29 CFR 1910.134(e)(1): The employer did not provide a medical evaluation to determine the employee's ability to use a respirator, before the employee is fit tested or required to use the respirator in the workplace:

On or about January 7, 1999.

a) At the establishment.

An employee uses a 1/2 facepiece cartridge respirator. The employer has not provided a medical evaluation for the employee.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Occupational Safety and Health Auministration

Inspection Number `1460580 Inspection Dates: 01/u//99 - 03/24/99 **Issuance Date:**

03/24/99



Citation and Notification of Penalty

Company Name: **Inspection Site:**



Citation 2 Item 7 Type of Violation: Other

29 CFR 1910.304(f)(4): The path to ground from circuits, equipment, and enclosures was not permanent and continuous:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The grounding pins were missing from the flexible cords.

ABATEMENT NOTE: Damage to electrical equipment such as removal of grounding pins voids the equipment's approval for use until the equipment is repaired.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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Occupational Safety and Health Administration

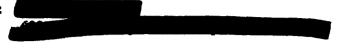
Inspection Number: J1460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 8 Type of Violation: Other

29 CFR 1910.305(g)(2)(ii): Flexible cords were not used in continuous lengths without splice or tap:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The flexible cord in the extension cords had been cut and spliced in several locations. The removed cord insulation was not replaced at the locations of the splices.

ABATEMENT NOTE: It is permitted to splice hard service flexible cords No. 12 or higher only if spliced so that the splice retains the insulation, other sheath properties, and usage characteristics of the cord being spliced.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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Occupational Safety and Health Administration

Inspection Number

1460580

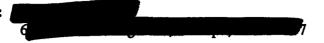
Inspection Dates: 01/07/99 - 03/24/99 **Issuance Date:**

03/24/99



Citation and Notification of Penalty

Company Name: **Inspection Site:**



Citation 2 Item 9 Type of Violation: Other

29 CFR 1910.305(g)(2)(iii): Flexible cords were not connected to devices and fittings so that tension would not be transmitted to joints or terminal screws:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used three-wire flexible extension cords to energize hand held polishers. There was no strain relief for the three wires at the plug attachment end of one of the cords.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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U.S. Department of Labo Occupational Safety and Health Administration



Citation and Notification of Penalty

Company Name: (Inspection Site:



Citation 2 Item 10 Type of Violation: Other

29 CFR 1910.1200(e)(1): The employer did not develop, implement, and/or maintain at the workplace a written hazard communication program which describes how the criteria specified in 29 CFR 1910.1200(f), (g), and (h) will be met:

On or about January 7, 1998.

a) Cutting and Polishing Area.

The employer did not implement a written hazard communication program at the worksite.

When cutting, shaping, and polishing, employees are exposed to silica (which can cause silicosis). When using glues and/or silicone stone polish, employees are exposed to hazardous chemicals including, but not limited to, trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant). Employees are also exposed to the hazards of propane (a flammable liquid) which is used to power a forklift.

ABATEMENT NOTE:

A written program should include descriptions of how the criteria for the following will be met:

- 1) Labeling and other forms of warning, including person(s) responsible for ensuring proper labeling, methods of labeling to be used, and procedures to review and update labels when necessary;
- 2) Material Safety Data Sheets, including person(s) responsible, methods of storage and access, and procedures to follow should Material Safety Data Sheets be missing;
- 3) Employee information and training, including person(s) responsible for the training, format of the training, elements of the training program, and procedures for scheduling of the training.

Additionally, a list of hazardous chemicals known to be present in the workplace must be compiled. Methods used to inform employees of the hazards associated with non-routine tasks and to inform contractors of workplace hazards must also be addressed. The written program must be made available upon request.

Occupational Safety and Health Administration

Inspection Number 1460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:

For additional information, refer to Appendix E of 29 CFR 1910.1200.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Citation 2 Item 11 Type of Violation: Other

29 CFR 1910.1200(f)(5)(i): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the identity of the hazardous chemical(s) contained therein:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees transferred Akemi Plastics Inc. Hi-Speed Hardening Paste from its original container to a screw-cap container. The screw-cap container was not labeling with the identity of the hardening paste. The material contains, among other hazardous ingredients, benzoyl peroxide (an irritant).

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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Occupational Safety and Health Aquinistration

Inspection Number 1460580

Issuance Date:

Inspection Dates: 01/07/99 - 03/24/99

03/24/99

Citation and Notification of Penalty

Company Name: **Inspection Site:**



Citation 2 Item 12 Type of Violation: Other

29 CFR 1910.1200(f)(5)(ii): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the appropriate hazard warnings:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees transferred Akemi Plastics Inc. Hi-Speed Hardening Paste from its original container to a screw-cap container. The screw-cap container was not labeling with chemical hazards of the hardening paste. The material contains, among other hazardous ingredients, benzoyl peroxide (an irritant).

ABATEMENT NOTE: Correct labels list both physical (safety) and health hazards.

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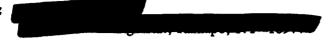
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Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99

Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 13 Type of Violation: Other

29 CFR 1910.1200(g)(1): The employer did not have a material safety data sheet for each hazardous chemical which they used:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Hazardous chemicals for which material safety data sheets were missing include, but are not limited to, silica (which can cause silicosis) whose exposure results from cutting, shaping, and polishing operations; trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) whose exposures result during gluing and polishing operations; and propane (a flammable liquid) whose exposure results from use of a propane powered forklift.

ABATEMENT NOTE: When raw materials are used in such a manner that employees are exposed to hazardous chemicals, the employer must obtain Material Safety Data Sheets from the manufacturers or importers of the materials. For example, if marble slabs contain a percentage of silica, and if employees shape or polish the slabs so that silica dust is liberated into the air, a Material Safety Data Sheet for the material must be obtained.

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Occupational Safety and Health Administration

Inspection Number Inspection Dates: 01/07/99 - 03/24/99

1460580

Issuance Date:

03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:

Citation 2 Item 14 Type of Violation: Other

29 CFR 1910.1200(h)(1): Employees were not provided information and training as specified in 29 CFR 1910.1200(h)(2) and (3) on hazardous chemicals in their work area at the time of their initial assignment and whenever a new physical or health hazard the employees have not been previously trained about was introduced into their work area:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees who use materials such as, but not limited to.

silica (a component of the airborne dust generated during cutting and polishing of marble which can cause silicosis);

trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) [which are used during gluing and polishing operations]; and

propane (a flammable liquid which is used to power a forklift)

were not informed of all of the following:

- 1) The requirements of this section;
- 2) Any operations where hazardous chemicals are present; and
- 3) The location and availability of the written Hazard Communication Program, list(s) of hazardous chemicals, and Material Safety Data Sheets.

Employees were not trained in at least all of the following topics:

- Methods and observances that may be used to detect the presence or release of a hazardous 1) chemical in the work area:
- The physical and health hazards of the chemicals in the work area; 2)

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

Occupational Safety and Health Aministration

Inspection Number 11460580

Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99

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Citation and Notification of Penalty

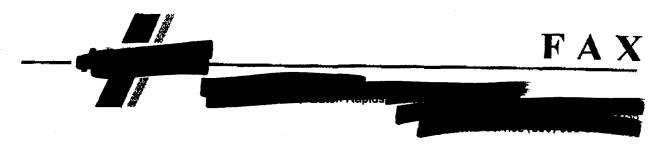
Company Name: Inspection Site:

- The measures employees can take to protect themselves, such as specific procedures, appropriate work practices, emergency procedures and personal protective equipment to be used; and
- 4) The details of the Hazard Communication Program, including an explanation of the labeling systems, Material Safety Data Sheets, and how employees can obtain and use the appropriate hazard information.

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FROM : AXSON NORTH AMERICA - PHONE NO. : 5175487172 - Feb. 22 1999 03:52PM P1



DATE :Monday, February 22, 1999

PAGES: 9

TO

CC

COMPANY: US Dept. of Labor

FAX

: 914-524-7515

FROM

SUBJECT : Corrected MSDS-es

Dear Mr. 7

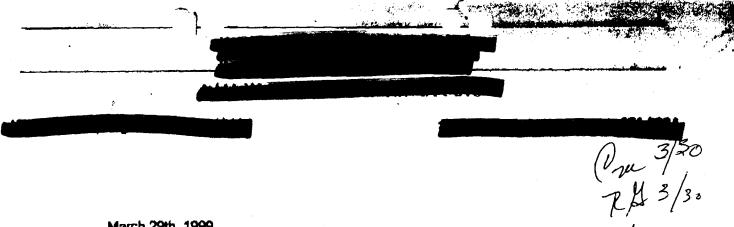
I am faxing to you corrected per your request MSDS-es of our Buff Flowing and HSP products. I need more time to create the proper MSDS of the product we import from Germany. Our supplier promised cooperation but needs time to collect data. I will fax these corrected MSDS-es some time this week, as soon as I get feed back from Europe. Please, let me know if you have any other suggestions which could help us to create the ideal Material Safety Data Sheet required by OSHA regulations.

Thank you for your patience, Sincerely,

Senior Developmen

st

MSDS'S PILED WART IN APPENDIX



March 29th, 1999

US Dept of Labor Occupational Safety and Health Administration Tarrytown Area Office 660 White Plains Rd - 4th Floor Tarrytown, NY 10591-5107

ATTN: Ms.

RE: Informal Conference Inspection #301460580

Inspection Dates: 01/07/99 and 02/18/99

Issuance Date: 03/24/99

Dear Ms.

This will confirm the informal conference which is scheduled to take place on April 12th, 1999,

at 10 AM via telephone between myself and either

As per our discussion the conference must take place prior to April 15th, 1999, therefore,

I do not wish to hold the informal conference any later than April 12th.

If there are any questions please call me at 201

Thank you.

Very truly yours

Occupational Safety and Health Administration Tarrytown Area Office 660 White Plains Road, 4th Floor Tarrytown NY 10591-5107

Phone: (914)524-7510 FAX: (914)524-7515 OSHA Website Address: http://www.osha.gov



Citation and Notification of Penalty

To:

and its successors

Inspection Site:

ATTN:

Inspection Number:

301460580

Inspection Date(s):

01/07/99 - 03/24/99

Issuance Date:

03/24/99

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below

This Citation and Notification of Penalty (this Citation) describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed herein is (are) based on these violations. You must abate the violations referred to in this Citation by the dates listed and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and Notification of Penalty you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. Please read the following paragraphs which outline your rights and responsibilities. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless this Citation is affirmed by the Review Commission or a court.

Posting - The law requires that a copy of this Citation and Notification of Penalty be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because of the nature of the employer's operations, where it will be readily observable by all affected employees. This Citation must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer. The penalty dollar amounts need not be posted and may be marked out or covered up prior to posting.

Informal Conference - An informal conference is not required. However, if you wish to have such a conference you may call to request one with the Area Director before the 15 working day contest period ends. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation(s) and/or penalty(ies).

If you decide to request an informal conference, call our office at (914) 524-7510 between 8AM and 4PM for an appointment. Complete, remove and post the page 4 Notice to Employees next to this Citation and Notification of

Penalty as soon as the time, date, and place of the informal conference have been determined. Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that, if you intend to contest, a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of this Citation. The running of this contest period is not interrupted by an informal conference.

Right to Contest - You have the right to contest this Citation and Notification of Penalty. You may contest all citation items or only individual items. You may also contest proposed penalties and/or abatement dates without contesting the underlying violations. <u>Unless you inform the Area Director in writing that you intend to contest the citation(s) and/or proposed penalty(ies) within 15 working days after receipt, the citation(s) and the proposed penalty(ies) will become a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency.</u>

You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to your inspection will be available 30 calendar days after the Citation Issuance Date. You are encouraged to review the information concerning your establishment at the OSHA Internet site at WWW.OSHA.GOV. If you have any dispute with the accuracy of the information displayed, please contact this office.

Penalty Payment - Penalties are due within 15 working days of receipt of this notification unless contested. (See the enclosed booklet and the additional information provided related to the Debt Collection Act of 1982.) Make your check or money order payable to "DOL-OSHA". Please indicate the Inspection Number on the remittance. OSHA does not agree to any restrictions or conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

Notification of Corrective Action - For violations which you do not contest, you should notify the U.S. Department of Labor Area Office promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation. Please inform the Area Office in writing of the abatement steps you have taken and of their dates, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. Attached is a letter with a form to assist you in meeting this requirement.

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he/she has been discriminated against may file a complaint no later than 30 days after the discrimination occurred with the U.S. Department of Labor Area Office at the address shown above.

Employer Rights and Responsibilities - The enclosed booklet (OSHA 3000) outlines additional employer rights and responsibilities and should be read in conjunction with this notification.

Citation and Notification of Penalty	Page 3 of 24	OSHA-2(Rev. 6/93)
		•
Penalty.		
U.S. Department of Labor Area Off	fice at the address shown above and post lidays) of the receipt by the employer of	tmarked within 15 working days
Notice to Employees - The law g	gives an employee or his/her representative/she believes the date to be unreasonable.	e the opportunity to object to any



NOTICE TO EMPLOYEES OF INFORMAL CONFERENCE

An informal conference has been scheduled with OSHA to discuss the citation(s) issued on
03/24/99. The conference will be held at the OSHA office located at Tarrytown Area Office,
660 White Plains Road 4th Floor, Tarrytown, NY, 10591-5107 on at
Employees and/or representatives of employees have a right to attend an
informal conference.

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Occupational Safety and Health Administration Tarrytown Area Office 660 White Plains Road, 4th Floor Tarrytown NY 10591-5107

Phone: (914)524-7510 FAX: (914)524-7515 OSHA Website Address: http://www.osha.gov



INVOICE/ DEBT COLLECTION NOTICE

Company Name:

Inspection Site:

Issuance Date:

03/24/99

Summary of Penalties for Inspection Number 301460580

Citation 1, Serious = \$ 450.00 Citation 2, Other = \$ 300.00

TOTAL PROPOSED PENALTIES = \$ 750.00

To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance.

OSHA does not agree to any restrictions or conditions or endorsements put on any check or money order for less than full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

<u>Interest</u>. Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is 3%. Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

<u>Delinquent Charges</u>. A debt is condered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

<u>Administrative Costs</u>. Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.

Area Director

Date

Occupational Safety and Health .m. .stration
Tarrytown Area Office
660 White Plains Road 4th Floor
Tarrytown NY 10591-5107
(914) 524-7510



Fax: (914) 524-7515 OSHA Website Address: http://www.osha.gov

March 24, 1999



Dear Mr.

An inspection of your workplace at 6, 1999 disclosed the following conditions.

, Ramapo NY begun on January

Dust that settled on work surfaces contained 30% silica. The dust was apparently generated during shaping and polishing operations. Personal monitoring performed during the inspection did not measure any silica in the air. Apparently, the presence of silica in the raw materials varies with the type of marble. There exists no exposure records (in the form of material safety data sheets) that describes the silica content of the materials and no exposure records (in the form of air monitoring) that evaluates employee exposure levels to silica [as required by 29 CFR 1910.134(d)(1)(i)].

Because OSHA monitoring did not measure an overexposure, no citation will be issued for this hazard. Because the results of OSHA monitoring suggest that an overexposure may be possible should employees shape and polish raw materials that contain silica, I recommend that you take the following steps voluntarily to eliminate or reduce your employees' exposure to the hazards described above.

Obtain material safety data sheets for all your raw materials. If any of the materials contain silica and you determine that you will continue to use silica containing materials, you must perform air monitoring under conditions that would measure the maximum daily exposure levels that employees are exposed to. Based upon the sampling results, you would then need to evaluate engineering controls and/or personal protective equipment needed to eliminate the hazard to the employees.

Sincerely,

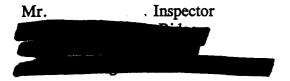
Area Director

Occupational Safety and Healt dm...stration
Tarrytown Area Office
660 White Plains Road 4th Floor
Tarrytown NY 10591-5107
(914) 524-7510
Fax: (914) 524-7515



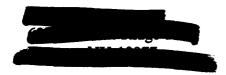
OSHA Website Address: http://www.osha.gov

March 24, 1999



Dear Mr.

In response to your referral concerning health hazards at:



the Occupational Safety and Health Administration conducted an inspection there. That inspection was completed on March 24, 1999. The results of our investigation of your referral items are as follows:

A sample of settled dust taken from the work surfaces was analyzed by the OSHA Lab and found to contain 30% silica. The settled dust was apparently generated during operations prior to the OSHA investigation. Results of personal air monitoring performed during cutting, shaping, and polishing operations showed no silica in the dust generated during the operations. Therefore, the investigation did not find concentrations of air contaminants in the air in excess of concentrations allowed by OSHA regulations. The mere presence of such dust does not violate any OSHA regulation.

The employer is being cited for various violations of OSHA regulations involving conditions other than silica overexposures. Correction of one of these violations will require the employer to obtain material safety data sheets for the different types of raw materials from which dust is generated during shaping and polishing. If any of the material safety data sheets indicate silica as a component of the material, and if the employer continues to use this material, the employer will have to resample to determine the silica exposure of the employees to comply with 29 CFR 1910.134(d)(1)(i). If the employer fails to send an abatement letter verifying compliance with this requirement, a follow-up investigation would likely be scheduled.

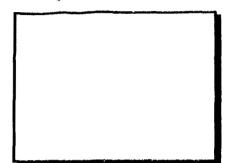
Attached for your information is a copy of the OSHA-2, Citation and Notification of Penalty, which was sent to the employer on March 22, 1999 and should have been posted at the workplace for at least three days after receipt.

Thank you for your interest in safety and health in the workplace.

Respectfully,

Area Director

Enclosure



Fax Cover Page

To:

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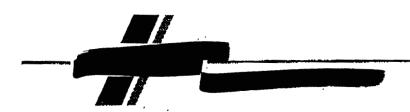
From: SLTC SAMPLING RESULTS

Date: 3-MAR-1999

There are 6 pages including this cover page.

U. S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION
Salt Lake Technical Center
1781 South 300 West
Salt Lake City, UT 84115-1802

Phone 801-487-0680 FAX 801-487-1190

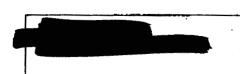


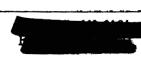
FAX

DATE: 1-29-98	FROM:	·····
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SUBJECT:		
FAX #	PAGES:	

MESSAGE:

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U.S. Department of Labor Occupational Safety and Health Agriculturation





Inspection Report

Wed Mar 24, 1999 5:44pm

Rpt ID Assignment Nr. CSHO ID Supervisor ID Inspection Nr. Opt. Insp. Nr.

Site	•	Site	Site
Address		Phone	15/A-X
Mailing Address		Mail Phone	Mail FAX
Controlling Corp		Employer ID	
Ownership A. Private Sec	tor	City 5077	County 087
Legal Entity		Previous Activity (State Only)	

		" Rela	ed Activity
Ivne	Number	Satisfied	Type Number Satisfied
R. Referral	901468447	Health	

Employed in Establishment	2 Advance Notice?	No	Category H. Health
Covered By Inspection	2 Union?	No	Primary SIC 3281
Controlled By Employer	4 Walkaround?	No	Secondary SIC
	Interviewed? (State only)		Inspected (State Only)

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Inspection Type C. R	leferral	Reason No Inspection
Scope of Inspection B. Pa	artial Inspection	
Classification		

Anticipatory Warrant Served?	No	Denial Date	Date ReEntered	Date ReDenied	ReEntered
Anticipatory Subpoena Served?	No	·			

Entry	01/06/99	13:15	First Closing Conference 03/24/9	9 12:00
Opening Conference	01/07/99	14:00	Second Closing Conference	
Walkaround	01/07/99	14:30	Exit 02/17/9	9 16:00
Days On Site	3		Case Closed	
			No Citations Issued	

Туре	ID	Optional Information
N	20	SIC 3281 IS NOT EXEMPTED BY THE APPROPRIATIONS

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Occupational Safety and Health Administration

Inspection Number: 301460580 Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



The alleged violations below have been grouped because they involve similar or related hazards that may increase the potential for injury resulting from an accident.

Citation 1 Item 1a Type of Violation: Serious

29 CFR 1910.132(d)(1): The employer did not assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment (PPE):

On or about January 25, 1999.

a) Cutting and Polishing Room:

The employer did not perform a comprehensive hazard assessment of the workplace, as outlined in Appendix B to 29 CFR 1910 - Subpart I, to determine the proper personal equipment that must be used to protect employees from the identified hazards. Examples of hazards present in the workplace include, but are not limited to, the following hazards.

During the cutting of marble slabs with the 16" stone cutting blade, employees do not wear eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

ABATEMENT NOTE: As part of the hazard assessment procedures mandated by 29 CFR 1910.132(d) and (f), employers must:

- select and ensure the use of personal protective equipment that will adequately protect affected employees from the identified hazards;
- 2) communicate selection decisions to each affected employee;
- 3) select personal protective equipment that properly fits each affected employee;
- 4) train employees in the proper use of their personal protective equipment, including all the topics listed in 29 CFR 1910.132 (f)(1); and
- 5) certify in writing that the hazard assessment and required training was performed.

Occupational Safety and Health Administration

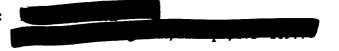
Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



The hazard assessment certification must include an identification of the workplace(s) covered by the assessment, the person certifying that the evaluation has been performed, the date(s) of the hazard assessment(s), and a statement that identifies the document as the personal protective equipment hazard assessment certification.

The training certification must include the name of each employee trained, the date(s) of the training, and a statement that identifies the document as the personal protective equipment training certification.

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Occupational Safety and Health Administration

Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 1 Item 1b Type of Violation: Serious

29 CFR 1910.132(f)(1): The employer did not provide training to each employee who is required to use personal protective equipment.

On or about January 25, 1999.

a) Cutting and Polishing Room:

Employees were not adequately trained in the use of personal protective equipment, as demonstrated by the following condition.

During the cutting of marble slabs with the 16" stone cutting blade, employees do not wear eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

Failure of employees to recognize the need to wear eye protection with side protection during the cutting operation demonstrates the lack of training of the employees.

ABATEMENT NOTE: At a minimum, employees must be trained in the following: when personal protective equipment is necessary, what personal protective equipment is necessary, how to properly don, doff, adjust, and, wear personal protective equipment, the limitations of the personal protective equipment, and the proper care, maintenance, useful life and disposal of the personal protective equipment.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Abated:

04/26/99

Occupational Safety and Health Administration

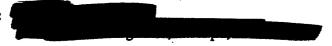
Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 1 Item 1c Type of Violation: Serious

29 CFR 1910.133(a)(2): Employer did not ensure that each affected employee used eye protection that provided side protection when there was a hazard from flying objects:

On or about January 25, 1999.

a) Cutting and Polishing Room:

During the cutting of marble slabs with the 16" stone cutting blade, employees were not wearing eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Abated:

04/19/99

Occupational Safety and Health Administration

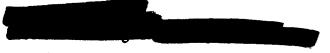
Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 1 Type of Violation: Other

29 CFR 1903.2(a)(1): The OSHA notice was not posted to inform employees of the protections and obligations provided for in the Act:

On or about January 9, 1999.

At the Establishment:

The OSHA notice was not posted.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

Date By Which Violation Must be Abated: Corrected During Inspec	
Toposed Penairy	

Occupational Safety and Health Administration

Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:

Citation 2 Item 2 Type of Violation: Other

29 CFR 1910.95(d)(1): A representative monitoring program was not developed and implemented when information indicated that an employee's exposure may equal or exceed an 8-hour time-weighted average of 85 dBA:

On or about January 26, 1999.

a) At the Establishment

On January 26, 1999, employees were monitored for noise exposure while performing shaping and polishing operations. During shaping operations, employees were exposed to noise levels equal to approximately 100 dBA [decibels as measured on the A weighted scale]. During polishing operations, employees were exposed to noise levels between 85 dBA and 90 dBA. Based upon information obtained during the investigation, employees periodically perform these operations long enough during one eight hour shift to exceed the 8-hour time-weighted average of 85 dBA. The employer has not established a representative noise monitoring program to evaluate employees' noise exposure.

ABATEMENT NOTE: Because the monitoring program must identify employees required to be included in a hearing conservation program, the monitoring must be conducted under conditions that measure the employees' maximum noise exposure during operations. Therefore, the monitoring must be done during those jobs that entail the largest amounts of shaping and polishing operations.

If noise monitoring indicates that employees are exposed to average noise levels in excess of 85 dBA, an effective hearing conservation program in compliance with 29 CFR 1910.95(c)-(n) and its appendices must be implemented. In addition to noise monitoring, such a program must include the following.

- (1) Provision a selection of hearing protectors from which employees can choose. The hearing protection must be individually fitted and must provide adequate noise reduction as determined by its Noise Reduction Rating (NRR). Evaluation of the adequacy of the hearing protection must be calculated according to an approved NIOSH method. Employee use of hearing protection when required by the noise standard must be enforced.
- (2) Training and education of each overexposed employee. Training must include the following topics:
 a) the effects of noise on hearing; b) the purpose of hearing protectors; c) the advantages, disadvantages, and attenuation of the various types of hearing protectors; d) the selection, fitting, use and care of the hearing protectors; and e) the purpose of and procedures for audiometric testing.

Occupational Safety and Health Administration

Inspection Number: 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



Citation and Notification of Penalty

Company Name: Inspection Site:



- (3) Institution of a medical monitoring program. This program must include following elements: a) obtaining a baseline audiogram for overexposed employees as soon as possible; b) obtaining additional audiograms annually; and c) evaluating the audiograms to determine if it is valid and if a threshold hearing shift has occurred. Employees must avoid exposure to workplace noise for at least 14 hours before audiometric testing for the baseline audiogram.
- (4) Procedures for preventing further occupational hearing loss whenever an employee has suffered a standard threshold shift (which is defined as an average hearing loss greater than 10 decibels at the frequencies of 2000, 3000, and 4000 Hz). At a minimum, employees must be informed that they have suffered a standard threshold shift, they must be retrained, and the adequacy of the their hearing protection must be reevaluated.
- (5) Maintenance of noise monitoring and audiometric testing records, as required by the "Access to Employee Exposure and Medical Records" regulation.

When average noise levels exceed 90 dBA, the hearing conservation program must also include implementation of all feasible engineering, work practice, and administrative controls needed to reduce employee noise exposure under 90 dBA.

Date By Which Violation Must be Abated:	404000000000000000000000000000000000000
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Occupational Safety and Health Administration

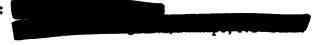
Inspection Number: 301460580

**Inspection Dates:** 01/07/99 - 03/24/99 **Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 3 Type of Violation: Other

29 CFR 1910.110(e)(4)(iii): Permanent and removable fuel containers were not securely mounted to prevent jarring loose, slipping, or rotating:

January 25, 1999

#### a) At the Establishment:

The propane tank used to fuel the forklift truck was not securely mounted to the forklift truck since the index pin was in place to prevent rotation of the tank.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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Date By Which Violation Must be Abated: Corrected During Inspection	
Proposed Penalty S 0.00	

Occupational Safety and Health Administration

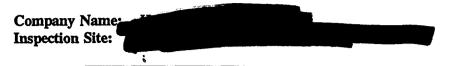
**Inspection Number: 301460580** 

**Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty



Citation 2 Item 4 Type of Violation: Other

29 CFR 1910.134(c)(2)(i): Where respirator use is not required and the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not determine that such respirator use does not in itself create a hazard and the employer did not provide the respirator users with the information contained in Appendix D of 29 CFR 1910.134 ("Information for Employees Using Respirators When Not Required Under the Standard"):

On or about January 25, 1999.

At the Establishment:

An employee uses a 1/2 facepiece cartridge respirator while preparing and installing products.

- a) The employer did not provide the employee with a copy of Appendix D of 29 CFR 1910.134.
- b) The employer did not determine that respirator use does not in itself create a hazard by virtue of the failure of the employer to provide a medical evaluation as specified by 29 CFR 1910.134(e).

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Occupational Safety and Health Administration

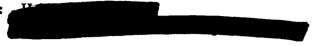
**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 5 Type of Violation: Other

29 CFR 1910.134(c)(2)(ii): Where respirator use is not required but the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not establish and implement those elements of a written respiratory program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator; and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user:

On or about January 25, 1999.

#### At the Establishment:

a) An employee uses a ½ facepiece cartridge respirator while preparing and installing products. The employer did not establish a written respirator program.

Date By Which Violation Must be Abated: 04/26/99	
Date By Which Violation Must be Abared: 04/26/99	
Proposed Penalty: \$ 0.00	

Occupational Safety and Health Administration

**Inspection Number: 301460580** 

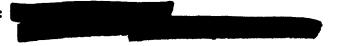
Inspection Dates: 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



### Citation 2 Item 6 Type of Violation: Other

29 CFR 1910.134(e)(1): The employer did not provide a medical evaluation to determine the employee's ability to use a respirator, before the employee is fit tested or required to use the respirator in the workplace:

On or about January 7, 1999.

a) At the establishment.

An employee uses a ½ facepiece cartridge respirator. The employer has not provided a medical evaluation for the employee.

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Occupational Safety and Health Administration

**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 7 Type of Violation: Other

29 CFR 1910.304(f)(4): The path to ground from circuits, equipment, and enclosures was not permanent and continuous:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The grounding pins were missing from the flexible cords.

ABATEMENT NOTE: Damage to electrical equipment such as removal of grounding pins voids the equipment's approval for use until the equipment is repaired.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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Occupational Safety and Health Administration

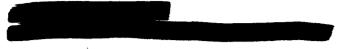
**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 8 Type of Violation: Other

29 CFR 1910.305(g)(2)(ii): Flexible cords were not used in continuous lengths without splice or tap:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The flexible cord in the extension cords had been cut and spliced in several locations. The removed cord insulation was not replaced at the locations of the splices.

ABATEMENT NOTE: It is permitted to splice hard service flexible cords No. 12 or higher only if spliced so that the splice retains the insulation, other sheath properties, and usage characteristics of the cord being spliced.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

Date By Which Violation Must be Abated: Corrected During Inspection Proposed Penalty: \$ 0.00

Occupational Safety and Health Administration

**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

Issuance Date: 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 9 Type of Violation: Other

29 CFR 1910.305(g)(2)(iii): Flexible cords were not connected to devices and fittings so that tension would not be transmitted to joints or terminal screws:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used three-wire flexible extension cords to energize hand held polishers. There was no strain relief for the three wires at the plug attachment end of one of the cords.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

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25. Other Employer Information: or how a specific properties a particular base or so

## U. S. Department of La r Occupational Safety and Health Administration



#### Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	S Serious	Citation Number	01	Item/Group	001 (b)
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.0132( f)	(1)			

Abatement Multi Period PPE Period	Step Abatements Plan   Report	Final Abatement	Action Type/Dates
30	1.00	04/26/99	

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#### AVD/Variable Information:

29 CFR 1910.132(f)(1): The employer did not provide training to each employee who is required to use personal protective equipment.

On or about January 25, 1999.

a) Cutting and Polishing Room:

Employees were not adequately trained in the use of personal protective equipment, as demonstrated by the following condition.

During the cutting of marble slabs with the 16" stone cutting blade, employees do not wear eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

Failure of employees to recognize the need to wear eye protection with side protection during the cutting operation demonstrates the lack of training of the employees.

ABATEMENT NOTE: At a minimum, employees must be trained in the following: when personal protective equipment is necessary, what personal protective equipment is necessary, how to properly don, doff, adjust, and wear personal protective equipment, the limitations of the personal protective equipment, and the proper care, maintenance, useful life and disposal of the personal protective equipment.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

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20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

Employees were cutting marble slabs using a 16" diameter rock cutting blade that rotates at a high speed. The diamond elements set into the blade can become loose and become projectiles.

Employees did not wear eye protection with side shields while the blade was rotating.

The above violation demonstrates that any personal protective equipment assessment done by the employer was incomplete and therefore not in compliance with the requirements of 1910.132. Training was also incomplete in that employees did not recognize the danger of the diamond elements flying through the air. [CSHO conversations with manufacturers of the cutting machines and blades verified that the diamond elements do come apart from the blades since they stated they make repairs to such blades on a daily basis.] The employer had no written certification of a personal protective equipment assessment or training in the use of personal protective equipment.

b) Equipment

See (a)

c) Location

Cutting and polishing room

d) Injury/Illness

Particles may become embedded in the eye, requiring medical treatment and resulting in temporary sight impairment. The classification of the violations of 1910.132 are classified as serious as a result of grouping them with the violation of 1910.133.

e) Measurements

n/a

21. Photo Nu	mber		Local	ion on	Video			
						• •	•	

- 23. Employer Knowledge: The employee work in plain sight without eye protection.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classification	a:			
Serious	Knowledge	S or O	Repeat?	Willful?
Y	Y	S	N .	N

First Repeat	Second Denest	Repeat Penalty

### INJURY VIOLATION PENALTY COMPUTATION

# U. S. Department of Labor Occupational Safety and Health Administration



Linglandon aggratusta gata araga

# Worksheet

Wed Mar 24, 1999 5:42pm

· -				Inspection Number	301460580
		·		Opt. Insp. Number	387
Establishment Name					
Type of Violation	S Serious	Citation Number	01	Item/Group	001 (c)
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.0133( a)	)( 2)			

Abatement Multis Period PPE Period	Step Abatements Plan Report	Final Abatement	Act	ion Type/Dates	
15		04/19/99			

## Substance Codes

AVD/Variable Information:
29 CFR 1910.133(a)(2):Employer did not ensure that each affected employee used eye protection that provided side protection when there was a hazard from flying objects: On or about January 25, 1999.

### a) Cutting and Polishing Room:

During the cutting of marble slabs with the 16" stone cutting blade, employees were not wearing eye protection with side protection. During this operation, the diamond elements in the blade can become dislodged from the wheel thus becoming a projectile.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		1	djustment Pa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
L Low	L Lesser	01	1500.00	60	0	10	0.0

Employee Exposure				+
Occupation	Assembler	Employer		*
Nr of Employees	2	Duration		Frequency
Employee Name		, <del>-</del>		
Address			Phone	
		<b>COC</b>		
Occupation	Helper	Employer		
Nr of Employees	1	Duration		Frequency
Employee Name				
Address			Phone	( ) -

		-	
Instance Description: A. I	lazard B. E	Equipment C. Location	D. Injury/Illness E. Measurements

4. Da	te/Time	
1/25	/99 10:00	

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

Employees were cutting marble slabs using a 16" diameter rock cutting blade that rotates at a high speed. The diamond elements set into the blade can become loose and become projectiles.

Employees did not wear eye protection with side shields while the blade was rotating.

The above violation demonstrates that any personal protective equipment assessment done by the employer was incomplete and therefore not in compliance with the requirements of 1910.132. Training was also incomplete in that employees did not recognize the danger of the diamond elements flying through the air. [CSHO conversations with manufacturers of the cutting machines and blades verified that the diamond elements do come apart from the blades since they stated they make repairs to such blades on a daily basis.] The employer had no written certification of a personal protective equipment assessment or training in the use of personal protective equipment.

b) Equipment

See (a)

c) Location

Cutting and polishing room

d) Injury/Illness

Particles may become embedded in the eye, requiring medical treatment and resulting in temporary sight impairment. The classification of the violations of 1910.132 are classified as serious as a result of grouping them with the violation of 1910.133.

e) Measurements n/a

21. Photo Number		Location on Video	
	·		

- 23. Employer Knowledge: The employee work in plain sight without eye protection.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classificatio	n: Knowledge			
Y	Y	S	N g dayan : ja	<b>N</b> 1 3 3.

		**************************************
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		Repeat Penalty
First Repeat	Second Reneat	Domant Danaits
Lawet Largest		
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The state of the s	1	
	1	

# INJURY VIOLATION PENALTY COMPUTATION

	TION: Material embedded in t		iporary signi impairii	CIIC.
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SEVERITY: High	Medium Low _x_ N	∕iinimal <u>staor</u> tii i ta ki k	an titt application i Santin	1977.
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PROBABILITY OF	injury: posed: 2	THE WAR STATE OF THE SEC.	क्षिक्ष क्षित्र का अपने क्षित्र क्षित्र क्षेत्र क्षित्र क्षेत्र का अपने क्षेत्र का अपने क्षेत्र का अपने क्षेत्र	na tiplomia
Number E	xposed: 2			
Frequency	y: Continuous Daily W to Danger: Danger Point N	eekly Partial Shift	Shortx	a) (60 unos
Proximity	to Danger: Danger Point N	earx Fringe		TO SEA NOTIFIE
Stress Fac			, , , , , ,	and the state of the state of

Wed Mar 24, 1999 5:42pm

Inspection Nr. 301460580 Citation Nr. 01 Item/Group 001 (c)

Other Factors: Employees usually stand to the side of the rotating blade, lowering the probability that the projectile would travel towards them. However, since one employee can walk around the room while the other employee is cutting, being struck by a flying object is a possibility.

USTMENT FACTO	Commence Commence	1	an anagaran sa		t - f (sale) (responsive v ve v	The second section of the section	
Good Faith:		<u> </u>	The second secon	A Section 1985 Annual Property of the Control of th	Samuel All the Same States	्रम् । स्वाप्त्रकारके	
	cation: The co	mpany h	as no writte	en safety ar	nd health p	rograms.	
History:	10%						j.

Event Code Date	Action Code	Citation Type	Penalty Abate Final Date Order
03/24/99 Z Add transaction	A Add	S Serious	0.0 04/19/99

# U. S. Department of Labor Occupational Safety and Health Aministration

# Worksheet

Wed Mar 24, 1999 5:42pm

W Cu IVIAI 24, 1999 3.42	·hт				
•				Inspection Number	301460580
	4.			Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	001
Number Exposed	<b>2</b>	No. Instances	1	REC	
Std. Alleged Vio.	1903.0002( a	)( 1)		graph was the second of the se	<b>.</b>

Abatement	MultiS	itep Abatemo	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	
0			.sa	Corrected During Inspection	

	<u> </u>	
Substance Codes		
	• •	

29 CFR 1903.2(a)(1): The OSHA notice was not posted to inform employees of the protections and obligations provided for in the Act:

On or about January 9, 1999.

At the Establishment:

The OSHA notice was not posted.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

	Per	alty	Calc	ula	ions			djustment Fa		Proposed Adjusted
Severity	Probabil	ity	G	ravi	ty	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	0.1	¥.,	00			60	0	10	0.0

Employee Exposure:			
Occupation	Assembler	Employer	
Nr of Employees	<b>2</b> (5 mg: 6,8)r	Duration	Frequency
Employee Name	the state of the s	المُعْمِمَةِ الأداري كيومَ ا	age of a real of proceedings and proceding the control of the cont
Address			Phone
	A 1980	Art of the stage	
Occupation	Helper of whom proceedings - the transfer	Employer	
Nr of Employees	1 Section of the section of the section of	Duration	Frequency
Employee Name			
Address		•	Phone ( ) -

Instance Description: A. Ha	zard B. Equipment C. Location D. Injury/Illness E.	Measurements

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Inspection Nr. 301460580 Citation Nr. 02 Item/Group 001

D. Injury/Illiness.

_,	
1.1	4. Date/Time
A Print.	1/7/99 15:00
and a real of	1///25 13.00

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO observed that no poster was posted in the workplace.

Violations for failure to comply with 1910.1200 and 1910.134 and electrical violations demonstrate that the employer does not seriously attempt to be in compliance with OSHA regulations.

During CSHO interviews with employees, responses to questions asked by the CSHO and other employee comments indicated that employees were not familiar of their rights under OSHA, particularly the right to speak with the CSHO without fear of reprisal and the right. to file a discrimination complaint if the employer takes action against employees for exercising their rights.

b) Equipment

n/a

c) Location

Polishing and cutting room.

d) Injury/Illness

n/a

e) Measurements

n/a

21. Photo Number	Location on	Video	

- 23. Employer Knowledge: The employer claims to have never been provided a copy of the poster from
- 24. Comments (Employer, Employee, Closing Conference): The CSHO gave a copy of the poster to the employer who immediately posted it on the wall in the cutting and polishing room where employees can easily read it, THUS ABATING THE VIOLATION.
- 25. Other Employer Information:

20	6. Classification	n:			
	Serious	Knowledge	S or O	Repeat?	Willful?
1	4	N	0	N	N

First Repeat		Repeat Penalty
	a w	

# U. S. Department of La¹ r Occupational Safety and Healt. Administration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
		•		Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	002
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.0095( d	)( 1)			

Abatement Period	 ep Abateme Plan	 Final Abatement	Action Type/Dates
30		04/26/99	

Substance Codes 8111 - NOISE.	CONTINUOUS OR INTERMITTENT (ACTION LEVEL)
SHOSHALLO CORES UTIL TO ISE,	COMPRESSES OF INTERVILLENT (ACTION DEVEL)

### AVD/Variable Information:

29 CFR 1910.95(d)(1): A representative monitoring program was not developed and implemented when information indicated that an employee's exposure may equal or exceed an 8-hour time-weighted average of 85 dBA:

On or about January 26, 1999.

### a) At the Establishment

ad 1 1 367

On January 26, 1999, employees were monitored for noise exposure while performing shaping and polishing operations. During shaping operations, employees were exposed to noise levels equal to approximately 100 dBA [decibels as measured on the A weighted scale]. During polishing operations, employees were exposed to noise levels between 85 dBA and 90 dBA. Based upon information obtained during the investigation, employees periodically perform these operations long enough during one eight hour shift to exceed the 8-hour time-weighted average of 85 dBA. The employer has not established a representative noise monitoring program to evaluate employees' noise exposure.

ABATEMENT NOTE: Because the monitoring program must identify employees required to be included in a hearing conservation program, the monitoring must be conducted under conditions that measure the employees' maximum noise exposure during operations. Therefore, the monitoring must be done during those jobs that entail the largest amounts of shaping and polishing operations.

If noise monitoring indicates that employees are exposed to average noise levels in excess of 85 dBA, an effective hearing conservation program in compliance with 29 CFR 1910.95(c)-(n) and its appendices must be implemented. In addition to noise monitoring, such a program must include the following.

- Provision a selection of hearing protectors from which employees can choose. The hearing protection must be individually fitted and must provide adequate noise reduction as determined by its Noise Reduction Rating (NRR). Evaluation of the adequacy of the hearing protection must be calculated according to an approved NIOSH method. Employee use of hearing protection when required by the noise standard must be enforced.
- Training and education of each overexposed employee. Training must include the following topics: a) the effects of noise on hearing; b) the purpose of hearing protectors; c) the advantages, disadvantages, and attenuation of the various types of hearing protectors; d) the selection, fitting, use and care of the hearing protectors; and e) the purpose of and procedures for audiometric testing.
- Institution of a medical monitoring program. This program must include following elements: a) obtaining a baseline audiogram for overexposed employees as soon as possible; b) obtaining additional audiograms annually; and c) evaluating the audiograms to determine if it is valid and if a threshold hearing shift has occurred. Employees must avoid exposure to workplace noise for at least 14 hours before audiometric testing for the baseline audiogram.
- (4) Procedures for preventing further occupational hearing loss whenever an employee has suffered a standard threshold shift (which is defined as an average hearing loss greater than 10 decibels at the frequencies of 2000,

25. CALCO 65

court to servicenboar and in registry of the contain sec, animally account at a confidence of 3000; and 4000 Hz). At a minimum, employees must be informed that they have suffered a standard threshold shift, they must be retrained, and the adequacy of the their hearing protection must be reevaluated. Ok who it could I'M. 2.5.0

Maintenance of noise monitoring and audiometric testing records; as required by the Access to Employee (5) Exposure and Medical Records" regulation to the content of the stranger of the ेंद्र दार्थात है 😘 BUTTER RETTILE TO BEET TO BE BE BE BEET TO BE BEET TO BE BEET TO BE BEET TO BE BE BEET TO BE BE BE BE BE **41** 98

When average noise levels exceed 90 dBA, the hearing conservation program must also include implementation of all feasible engineering, work practice, and administrative controls needed to reduce employee noise exposure under 90 dBA.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Jr. 11 J. 14.

	Penalty	Calculation		l l	Adjustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	G Greater	03	1000.00	60	0	10	300.00

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Employee Exposure					
Occupation	Assembler	Employer	e e	<u> </u>	
Nr of Employees	2	Duration	e a service	Frequency	1 2 2 2 2
Employee Name					
Address			Phone		
Occupation	Helper	Employer	, see a constant		2
Nr of Employees	1	Duration		Frequency	
Employee Name					
Address			Phone	- 127	

Instance Description: A. Hazard B. Equipment C. Location D. Injury/Iline	SS
4 Date/Time	

1/26/99

- 20. Instance Description Describe the following:
  - a) Hazards-Operation/Condition-Accident

Employees were sampled for noise. Noise levels were measured during shaping operations that would expose employees to 8-hour average noise levels over 85 dBA if the operation would continue for over about one hour.

On the day of the sampling, noise levels were measured to be 23.7% for the person doing the shaping. According to employee interviews, on some days shaping may be done for well over an hour. However, the amount of shaping that is done on any one day depends on customer orders as each order may require a different amount of shaping. The shaping operation is only one step in the preparation and on-site installation of the product, and as such it occurs at irregular intervals.

When the CSHO tried to find out from the employees what type of job would be the best type of jog to sample, the response was too vague to allow the CSHO to request permission to sample for the type of job that would have more shaping than that done on the day of the noise sampling. Because the sampling data that exists and employee interviews taken as a whole become information that indicates that the employee's exposure will on various days exceed an average of 85 dBA, citing 1910.95(d)(1) can be defended by the available information without the need for additional sampling data. During abatement verification, OSHA can review the employer's data and compliance with the remaining requirements for an adequate hearing conservation program.



E. Measurements

b) Equipment

Employees use hand-held tools that shave off (round) the edges of marble slabs.

c) Location

Production area.

d) Injury/Illness

Hearing loss. Because the information suggests that noise levels are not high enough to result in average exposure in excess of 90 dBA (as measured using a 90 dBA threshold), the violation is cited as other than serious. [The other operations, such as polishing, result in noise exposure between 85 and 90 dBA, as measured on the day of the sampling.]

e) Measurements

See OSHA 92 forms and attached data.

21 Photo Number	Location on Video
	EXCREDIT OH A IGEO
21. 1 HOW THEMOOR	

- 23. Employer Knowledge: The employer is aware that noise level are high and does provide PPE (ear inserts with an NRR of 29) for employee use.
- 24. Comments (Employer, Employee, Closing Conference):

15%

25. Other Employer Information:

26. Classificatio	n:			
Serious	Knowledge	S or O	Repeat? -	Willful?
N	· Y	0	N .	N

	A 75	
First D4		Domest Density
		Repeat reliaity

# **ILLNESS VIOLATION PENALTY COMPUTATION**

ILLNESS DESCRIPTION: Hearing loss. Because levels are below 90 dBA, violation is classified as other than serious.

as other than serious.	
SEVERITY: High Medium Low	
Number Exposed: 2 Frequency: Continuous Dail 1 to 8 Hours Per PPE: Not Used	ly Weekly Partial Shiftx_ Short Week Greater Than 8 Hours per Week me Employeesx_ Used By All Employees ramx Good Written Program
Written Program Medical Surv.: No Programx_ Stress Factor: n/a	With Minor Deficiencies Partially Effective Program
employer but its use is	will occur at irregular intervals. PPE is provided by the not enforced.
FINAL PROBABILITY AS	SESSMENT: GREATERx_ LESSER
ADJUSTMENT FACTORS	propagation of the contract of the contract of the propagation of the contract
Good Faith: 25%	and the state of the

PRINCE PROMABILITY ASSESSED BELLEGHER LEG __ KESSED

NEST CREVIOLOGIC

The employer has no written safety and health program.

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A CONTRACTOR

10% 

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Justification: A SEAR OF NEW OF CORRECTIONS The employer has not been cited for violations in the past three years.

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Event Code Date	Action Code	Citation Type	Penalty Abate Date C	Final Order
03/24/99 Z Add transaction	A Add	O Other	300.00 04/26/99	
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# U. S. Department of Labor Occupational Safety and Health Administration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	003
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.0110( e	)( 4)( iii)			

Abatement	MultiS	tep Abatem	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	1
0				Corrected	
				During Inspection	

	Codes	

### AVD/Variable Information:

29 CFR 1910.110(e)(4)(iii): Permanent and removable fuel containers were not securely mounted to prevent jarring loose, slipping, or rotating:

January 25, 1999

### a) At the Establishment: .

The propane tank used to fuel the forklift truck was not securely mounted to the forklift truck since the index pin was in place to prevent rotation of the tank.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fa	ctors	Proposed /	
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Pena	ilty
N Minimal	L Lesser	01		60	0	10		0.0
Repeat Factor		0						

Occupation	Assembler	Employer	
Nr of Employees	1	Duration	Frequency
Employee Name			
Address		Phone	ı
Occupation	Helper	Employer	(1) 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Nr of Employees	1	Duration	Frequency
Employee Name			
Address	so one organism pro-	Phone	( ) - ( )

at the sale of the	
Instance Description: A. Hazard *B. Equipment C. Location D. Injury/Illne	ce D Meseuraments
missince posetification. At the and D. Espiritum C. Escation D. Englisystime	352 278 (4152 3) (1531 1441 152
and the second of the second o	

	cription - Describe	the following	នាងការ (ប្រហាជនាមាន)	g grapheryseen	1988 B Was Green	: its
a) Hazar	ds-Operation/Cond	ition-Accident				<u>-</u>
	The CSHO observe	d use of a forkli	ft truck by employe	es. The CSHO o	bserved the propane	
b) Equip		ed properly so the	at the forklift pin v	vas not in use.		-
o) Equip	Clark model GCS1	5 Type LP, seria	al number 6127-07	30-6330FA.	a gregaria de la d	
c) Locati	ion		to Spring B. in your as along the entire consideration in a patient in the entire con-	- manufacture of the second	المراجعين والمراجع والمراجع والمراجع والمراجع	
	The truck is garage outside yard.		and polishing roof	n and is used to	move objects in the	
d) Injury	/Illness	•	11.371	Age - Section Company - Sectio		
	Minor burns not re	equiring medical	treatment.	e new new elegan in the control of the	ere e krije pr <del>ese</del> roj i d	
e) Measu	n/a		7. 7. 4	2.7		
	- 1. ·	-	Ashie V			
21. Photo Num	iber		Location on Video	)		-71
			. w., sije eskir es	enterior de la capital de la c	November 1 seeme	
**************************************		L				
23. Employer Kr	nowledge: The lac	k of use of the p	in was readily obs	ervable.	e de la companya de La companya de la co	,
	7	a Clasina Cart	manaa) . Immadis	alse smoon looming	of the violation the	
4. Comments (F	employer, Employe	ee, Closing Confe	erence): Immediate	ely upon learning	of the violation, the	-
					, THUS ABATING	
eduction.	If there are is a	penalty proposed	i for this violation	, it quaimes for	a quick fix penalty	
eduction.						
25. Other Emplo	yer Information:					
· ·	•				A. T.	
26. Classification	on:					
20. 0.000000000000000000000000000000000						
Serious	Knowledge	SorD	Repeat?	Willful?		
	Knowledge Y	S or O	Repeat?	Willful?	,	
Serious					<u> </u>	
Serious N		0		N	at Penalty	
Serious N	Y	0	N	N	it Penalty	
Serious N	Y	0	N	N	it Penalty	-
Serious N	Y Repeat	O Secon	N nd Repeat	N Repea	at Penalty	
Serious N	Y Repeat	O Secon	N	N Repea	it Penalty	-
Serious N First	Y Repeat INJURY	O Secon	N nd Repeat	N Repea	at Penalty	
Serious N First	Repeat INJURY VIPTION: Minor b	O Secon	N  A Repeat  ENALTY COM  Ting medical trea	N Repea	it Penalty	•
Serious  N  First  NJURY DESCR	INJURY \ IPTION: Minor b	O Secon	N ad Repeat ENALTY COM	N Repea	at Penalty	•
Serious  N  First  NJURY DESCRITE: High PROBABILITY OF	INJURY \ IPTION: Minor b  Medium  FINJURY:	O Secon	N  A Repeat  ENALTY COM  Ting medical trea	N Repea	it Penalty	•
Serious  N  First  NJURY DESCRIBENCE SEVERITY: High PROBABILITY O	INJURY N IPTION: Minor b  Medium FINJURY: Exposed: 2	O Second VIOLATION Purns not required Low	N  Mad Repeat  ENALTY COMI  ring medical trea  Minimalx =================================	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High  PROBABILITY O  Number  Frequen	INJURY N IPTION: Minor b  Medium FINJURY: Exposed: 2 cy: Continuous	O Secondary Colors of the Color	N  Mad Repeat  ENALTY COMI  ring medical trea  Minimal _ x _  = = = = = = =	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High  PROBABILITY O  Number  Frequen  Proximit	INJURY N IPTION: Minor b  Medium FINJURY: Exposed: 2 cy: Continuous	O Secondary Colors of the Color	N  Mad Repeat  ENALTY COMI  ring medical trea  Minimalx =================================	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High PROBABILITY O  Number Frequen Proximit Stress F	INJURY \ INJURY \ IPTION: Minor b  Medium IPTION: Exposed: 2 cy: Continuous IPTION: Danger: Da	O Secondary Colors of the Color	N  Mad Repeat  ENALTY COMI  ring medical trea  Minimal _ x _  = = = = = = =	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High PROBABILITY O  Number Frequen Proximit Stress F	INJURY \ INJURY \ IPTION: Minor b  Medium  F INJURY: Exposed: 2 cy: Continuous cy to Danger: Danger: actor: n/a	O Secondary Colors of the Color	N  Mad Repeat  ENALTY COMI  ring medical trea  Minimal _ x _  = = = = = = =	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High  PROBABILITY O  Number  Frequen  Proximit  Stress F  Other Fa	INJURY \ INJURY \ IPTION: Minor b  Medium  F INJURY: Exposed: 2 cy: Continuous cy to Danger: Danger: actor: n/a	/IOLATION P urns not requir Low Daily W ger Point N	N  TENALTY COMIT  Ting medical treat  Minimal _ x = = = = = = = = = = = = = = = =	N Repea		
Serious  N  First  NJURY DESCR  SEVERITY: High PROBABILITY O  Number Frequen Proximit Stress F Other Fa	INJURY \ INJURY \ IPTION: Minor b  Medium  FINJURY: Exposed: 2 cy: Continuous ty to Danger: Danger: Danger: n/a factor: n/a final PROBABILI	/IOLATION P urns not requir Low Daily W ger Point N	N  TENALTY COMIT  Ting medical treat  Minimal _ x = = = = = = = = = = = = = = = =	N Repea		
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Serious  N  First  SEVERITY: High PROBABILITY O Number Frequen Proximit Stress F Other Fa	INJURY N IPTION: Minor b  Medium  Find Medium  SF INJURY: Exposed: 2 cy: Continuous cy to Danger: Danger: Danger: n/a actor: n/a FINAL PROBABILIE FACTORS	/IOLATION P urns not requir Low Daily W ger Point N	N  TENALTY COMIT  Ting medical treat  Minimal _ x = = = = = = = = = = = = = = = =	N Repea		

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Justific	ation:	-	
JUSTILL	<i>7</i> 1116711.		

The employer has no written safety and health program.

History

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Justification:

The company has no history of OSHA violations.

Event Code Date	Action Code	Citation Type	Penalty Abate Final Date Order
03/24/99 Z Add transaction	A Add	O Other	0.0

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Commission Section of Administration of

# U. S. Department of Labor Occupational Safety and Health Administration



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# Worksheet

Wed Mar 24, 1999 5:42pm

WCd Mai 24, 1999 011-p-	•			Inspection Number		301460580
				Opt. Insp. Number		387
Establishment Name	7.1					
Type of Violation	O Other	Citation Number	02	Item/Group	004	
Number Exposed	1	No. Instances	1	REC R Refer	ral	
Std. Alleged Vio.	1910.0134( c	)(2)( i)				•

Abatement Period	MultiS PPE Period	itep Abatem Plan	D.	Final Abatement	Action Type/Dates	
30				04/26/99		9.

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Substance Codes	Lat.
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	- Apple 6

### AVD/Variable Information:

29 CFR 1910.134(c)(2)(i): Where respirator use is not required and the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not determine that such respirator use does not in itself create a hazard and the employer did not provide the respirator users with the information contained in Appendix D of 29 CFR 1910.134 ("Information for Employees Using Respirators When Not Required Under the Standard"): On or about January 25, 1999.

At the Establishment:

An employee uses a facepiece cartridge respirator while preparing and installing products.

- a) The employer did not provide the employee with a copy of Appendix D of 29 CFR 1910.134.
- b) The employer did not determine that respirator use does not in itself create a hazard by virtue of the failure of the employer to provide a medical evaluation as specified by 29 CFR 1910.134(e).

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fac	tors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60	0	10	0.0
Repeat Factor		0					
							15.

Employee Exposure:				
Occupation	Assembler	Employer	and the second s	, made e
Nr of Employees	2	Duration	Frequency	· ·
Employee Name			•	
Address		Phone		

Instance Description:		B. Equipment			

4. Date/T	ime	
1/25/99	10:00	

20. Instance Description - Describe the following:
a) Hazards-Operation/Condition-Accident

The CSHO asked employees to show the CSHO the PPE used by the employees. The Lead Man showed the CSHO a ½ facepiece respirator which the employee says he wears sometimes in the field when installing the marble tabletops, fireplaces, etc. The employee bought the respirator himself (that is, it was not supplied by the employer). The CSHO examined the respirator, and could not determine the exact make and model of the respirator. The employee did not have the original box so the identity could not be determined by looking at the original box. (The text on the cartridges had been scratched and was unreadable.)

The employer has no written respirator program. The employee was not given a copy of Appendix D of 1910.134. Also, the employer did not satisfy the medical evaluation requirements of 1910.134.

The CSHO did not observe the employee using this respirator since the CSHO did not observe installation operations, but did observe the employee using a dust filtering respirator while they were shaping and polishing the marble.

(Note: The second employee working for the employer only uses a dust filtering respirator.)

b) Equipment

n/a

c) Location

Cutting and polishing room.

d) Injury/Illness

Because no overexposures to air contaminants were documented, and because no medical evidence was uncovered that indicates use of the ½ facepiece respirator would be a serious health hazard for the employee, the violation is classified as other than serious. Possible health effects would be skin irritation/dermatitis and minor pulmonary distress.

e) Measurements

n/a

21. Photo Number	Location on Video
22. 2200	

- 23. Employer Knowledge: The employer knows that employees use respirators and was aware of the ½ facepiece respirator that is stored in a visible location at the premises.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classificatio	n:			
Serious	Knowledge	S or O	Repeat?	Willful?
N	Y	ο '	N	N

First Repeat	Second Repeat	Repeat Penalty
		* *
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# **ILLNESS VIOLATION PENALTY COMPUTATION**

LLNESS DESCRIPTION: Min				ry distress not
LLNESS DESCRIPTION: Mirequiring medical treatment			> 1 电线接收 , ( ) \$156.	্তি ক্রি <b>টা প্রতিটা প্রতিটি একরে</b> সামুদ্ধ বা ভারি জিলা ড্রেটিটা
SEVERITY: High Medium PROBABILITY OF INJURY:	n Low	_ Minimalx ========		

Number Expo Frequency: C	Continuous	_ Daily rs Per Wo	Weekly	Partial S	hift $\underline{x}$ Sho Hours per We	rt	
PPE: Not Use	ed Used E	By Some	Employees	Used By	All_Employees	sx	
			_x_ Good				
Medical Surv	• No Program	gram wr	th Minor Defi	em Par	tially Effective	Program	
Stress Facto	n/a ∵n/a	<b>'^_</b> '			LIGHT LITECTIVE	Trogram	
		er of hor	ırs per week	of respirato	or use varies	depending on	the
						ay, but actual	
	particular da			ight oo two	Color	iy, our actual	
	puritional out	, 10 0000	1000	· · · · · · · · · · · · · · · · · · ·	and the second s		Ť.
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ADJUSTMENT FACT	25% 15% 0% _x		SSMENT: GRI	EATERI	LESSER x		•
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ADJUSTMENT FACT	25% 15% 0%x fication: The emplo	yer has				= = = = = = = = = = = = = = = = = = =	
Good Faith:  Justi  History:	25% 15% 0%x ication: The emplo	yer has				s.	
Good Faith:  Justi  History:	25%	= = = = :    		afety and he	alth program	= = = = = = = = = = = = = = = = = = =	

Event Date	Event Code	Action Code	Chation Type	Penalty Abate Final Date Order
03/24/99	Z Add transaction	A Add	O Other	0.0 04/26/99

# U. S. Department of Labor

Occupational Safety and Health. Administration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	005
Number Exposed	1	No. Instances	1	REC R Referr	rai
Std. Alleged Vio.	1910.0134( c	e)(2)( ii)			

Abatement Period	tep Abateme Plan	ents Report	Final Abatement	Action Type/Dates
30			04/26/99	

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				100
Si.	DSE	2		

# AVD/Variable Information:

29 CFR 1910.134(c)(2)(ii): Where respirator use is not required but the employer provides respirators at the request of employees or permits employees to use their own respirators, the employer did not establish and implement those elements of a written respiratory program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator; and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user:

On or about January 25, 1999.

At the Establishment:

150 .12 / 1.J. B

a) An employee uses a facepiece cartridge respirator while preparing and installing products. The employer did not establish a written respirator program.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fa	ctors	Proposed Adjusted Penalty
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60	0	10	0.0
*****************************			***************************************	***************		-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A	aassaassaassa 60000000000000000000000000
Repeat Factor		0					

Occupation	Assembler	•	Employer		
Vr of Employees	2		Duration	Frequency	
Employee Name					
Address			Phone		

Instance Description:	A. Hazard B. Equipment C.	Location D. Injury/Illness E. Measurements

4. Date/Time		
1/25/99 10:00	in establish in	

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO asked employees to show the CSHO the PPE used by the employees. The Lead Man showed the CSHO a ½ facepiece respirator which the employee says he wears sometimes in the field when installing the marble tabletops, fireplaces, etc. The employee

bought the respirator himself (that is, it was not supplied by the employer). The CSHO examined the respirator, and could not determine the exact make and model of the respirator. The employee did not have the original box so the identity could not be determined by looking at the original box? (The text on the cartridges had been scratched and was unreadable.)

The employer has no written respirator program. The employee was not given a copy of Appendix D of 1910.134. Also, the employer did not satisfy the medical evaluation requirements of 1910.134.

The CSHO did not observe the employee using this respirator since the CSHO did not observe installation operations, but did observe the employee using a dust filtering respirator while they were shaping and polishing the marble.

(Note: The second employee working for the employer only uses a dust filtering respirator.)

- b) Equipment
  - n/a
- c) Location

Cutting and polishing room.

d) Injury/Illness

Because no overexposures to air contaminants were documented, and because no medical evidence was uncovered that indicates use of the ½ facepiece respirator would be a serious health hazard for the employee, the violation is classified as other than serious. Possible health effects would be skin irritation/dermatitis and minor pulmonary distress.

e) Measurements

n/a

Photo Number Location on Video	
Photo Number I Location on Video	

- 23. Employer Knowledge: The employer knows that employees use respirators and was aware of the ½ facepiece respirator that is stored in a visible location at the premises.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classificatio	n:			
Serious	Knowledge	S or O	Repeat?	Willful?
N	Y	0	N	N

First Repeat	Second Repeat	Repeat Penalty

## **ILLNESS VIOLATION PENALTY COMPUTATION**

				·					
LLNESS	<b>DESCRIPTION:</b>	Minor	skin	irritation/dermatitis	and/or	minor	pulmonary	distress	not
equiring	g medical treatr	nent.					. ,		

SEVERITY: High	Medium	Low	Minimal _	_x_	A war	
PROBABILITY OF INJ Number Expo		====	====	=====	=====	
Frequency: C			Weekly _x_ Grea	Partial Shi iter Than 8 H	ft _x_ Shor lours per Wee	t

	PPE: Not Used Used By Some Employees Used By All Employeesx No Written Programx Good Written Program Written Program With Minor Deficiencies Medical Surv.: No Programx Effective Program Partially Effective Program Stress Factor: n/a  Other Factors: The number of hours per week of respirator use varies depending on the installation jobs. The maximum use might be two hours per day, but actual use on a particular day is usually less.	
eri i	FINAL PROBABILITY ASSESSMENT: GREATER LESSERx_	
ADJU	STMENT FACTORS	
	Good Faith: 25%  15%  0%  x  Justification:  The employer has no written safety and health programs.	er.
	History: 10%x_  O%x_  Justification:  The company has no history of OSHA violations.  ===================================	

Event Code Date	Action Code	Citation Type	Penalty	Abate Date	Final Order
03/24/99 Z Add transaction	A Add	O Other		0.0 04/26/99	•

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# U. S. Department of Labor Occupational Safety and Health Administration



# Worksheet

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Wed Mar 24, 1999 5:42pi				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	006
Number Exposed	1	No. Instances	1	REC R Referr	al
Std. Alleged Vio.	1910.0134( e	)( 1)			

Abatement Period	MultiS PPE Period	tep Abatem Plan	ents Report	Final Abatement	Action Type/Dates	
30				04/26/99	·	

Substance Codes	

AVD/Variable Information:
29 CFR 1910.134(e)(1): The employer did not provide a medical evaluation to determine the employee's ability to use a respirator, before the employee is fit tested or required to use the respirator in the workplace:

On or about January 7, 1999.

a) At the establishment.

An employee uses a ½ facepiece cartridge respirator. The employer has not provided a medical evaluation for the employee.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		P	djustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60	0	10	0.0

Employee Exposure:			
Occupation	Assembler	Employer	
Nr of Employees	2	Duration	Frequency
Employee Name			
Address		Phone	

Instance Description: A.	Hazard B. Equipment C. Location	

- 20. Instance Description Describe the following:
  - a) Hazards-Operation/Condition-Accident

The CSHO observed a ½ facepiece cartridge respirator. The CSHO interviewed the employee who stated that he occasionally uses the respirator. The employee verified that he has never had a medical evaluation for respirator use. According to OSHA policy statements, this condition is in violation with the requirement of 1910.134(e)(1).

b) Equipment

The employee did not have the original box for the respirator, and any identifying markings on the respirator or cartridge were obscured.

c) Location

The employee uses the respirator in the field during installation of products.

d) Injury/Illness

Because no overexposures to air contaminants were documented, and because no medical evidence was uncovered that indicates use of the ½ facepiece respirator would be a serious health hazard for the employee, the violation is classified as other than serious. Possible health effects would be skin irritation/dermatitis and minor pulmonary distress.

e) Measurements

n/a

21. Photo Number	Location on Video	

- 23. Employer Knowledge: The employee uses and store the respirator in plain view.
- 24. Comments (Employer, Employee, Closing Conference):

. ...)

25. Other Employer Information:

26. Classificatio	n:			
Serious		S or O		Willful?
N	Y	0	N ·	N .

First Repeat	Second Repeat	Repeat Penalty
		·

	ILLNESS V	'IOLATIO	N PENALT	Y COMP	JTATION		
ILLNESS DESCRIPT	ION: Minor d	ermatitis a	and/or mino	pulmonai	y distress.		
SEVERITY: High	Medium	_ Low	Minimal	_x_			
PROBABILITY OF IN					====		
PPE: Not Us  Medical Sur Stress Factor	Continuous  1 to 8 Hou  1 to 8 Hou  2 Used  No Written  Written Pro  V.: No Progran	rs Per Wee By Some E Program _ ogram With nx Eff	ek Greatemployees x Good Volume Minor Deficective Progra	ter Than 8   x Used B Vritten Prog iencies im Par	Hours per Woy All Employ gram	eek ees ve Program	
	a dust filter			uge respir	ator. The or	ner emplo	yee omy
FINA	L PROBABILI	TY ASSESS	MENT: GRE	ATER			
ADJUSTMENT FAC	TORS	Brown Brown					
Good Faith:	25% 15% 0%> ification:			ing talangan	10 10 10 10 10 10 10 10 10 10 10 10 10 1		१ त्या अक्षान राज्या के कारण १ त्या अक्षान राज्या के कारण संग्रहित हुत्त कुल्या

MODIFICATION The employer has no written safety and health program/ ရှိ ကျော်ကောက် ကြီးလျှင်းများ သင်္ချာ ကျောင်းများ ကြာလေးသည်။ သို့ ကျော်ကောက် ကြီးလျှင်းများ သင်္ချာ ကျောက်သည်။ 

History: 1879

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Justification:

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The employer has not been cited for violations in the past three years. ______

Byens Event Code	Action Code	Citation Type	Penalty Abate Final Date Order
03/24/99 Z Add transaction	A Add	O Other	0.0 04/26/99

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# U. S. Department of Loor Occupational Safety and Healer Administration

# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
A0040000000000000000000000000000000000				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	007
Number Exposed	2	No. Instances	2	REC	
Std. Alleged Vio.	1910.0304( f)	0(4)			

Abatement		tep Abateme	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	
0		-		Corrected	·
l				During	
L		L		Inspection	

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AVD/Variable Information:

29 CFR 1910.304(f)(4): The path to ground from circuits, equipment, and enclosures was not permanent and continuous:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The grounding pins were missing from the flexible cords.

ABATEMENT NOTE: Damage to electrical equipment such as removal of grounding pins voids the equipment's approval for use until the equipment is repaired.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

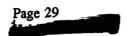
	Penalty	Calculat	ions		A	djustment Fa	ectors	Proposed Adjusted
Severity	Probability	Gravi	ty_	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01			60	0	10	0.0

Employee Exposure:		
Occupation	Assembler	Employer
Nr of Employees	2	Duration Frequency
Employee Name		
Address	19.53	Phone

Insta	nce Descripti	on:	A.	Hazard	B. Equip	oment C	. Location	D.	Injury/	Illness	E. Mo	asureme	nts
	2.000.000.000.000.000.000				1 7 176	West Street	second to the second						

Could Conveying a region of source suggests and

20. Instance Description - Describe the following: A part of the following a) Hazards-Operation/Condition-Accident



The CSHO observed employees using double-insulated eclectic powered grinders when polishing marble table tops. The tools were energized via several flexible cords. These cords had there ground pins removed and had numerous splices. One of the cords had insufficient strain relief by the plug.

b) Equipment -

On 1/25/99 the CSHO observed an employee using a Porta Cable Model 1700 heat gun that had a three prong plug. This tool is normally used by employees.

c) Location

Polishing area.

d) Injury/Illness

Electrical shock and/or minor electrical burns not requiring medical treatment.

e) Measurements

The CSHO tested the outlets which were properly grounded.

	21 Photo Number		
ξ.	21. Photo Number	Location on Vi	deo
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- 23. Employer Knowledge: The damage to the flexible cord was visible in plain view.
- 24. Comments (Employer, Employee, Closing Conference): The employer recognized the problem and replaced the damaged cord by the following morning.
  - 25. Other Employer Information:

26. Classificatio	n:			
Serious	Knowledge	S or O'	Repeat?	Willful?
N	Y	0	N	M

First Repeat	· Second Repeat	Repeat Penalty

### INJURY VIOLATION PENALTY COMPUTATION

INJURY DESCRIPTION:	Electric shock and	minor electric bu	irns not requiring	medical treatment.

INJUNT DESCRIPTION	ON: Elecule	SHOCK and	minor electr	ic builts no	ricdaning	medical	псашис
SEVERITY: High	Medium	_ Low	Minimal	_x			na sala no succession
PROBABILITY OF IN  Number Exp  Frequency:  Proximity to  Stress Facto  Other Factor	cosed: X Continuous _ Danger: Danger: n/a	===== Daily _ ger Point _	= = = = = = Weekly _ Nearx	Partial Sh Fringe	ift _x_ S	= = = = hort	
FINA ======== ADJUSTMENT FAC	AL PROBABILI ======= TORS	TY ASSES	SMENT: GRE	ATER L	ESSER _x		= = = = 
Good Faith:	25% 15% 0% ification:			m*t			

The employer has no written safety and health programs.

History:

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Justification: The employer has not been previously inspected by OSHA.

Event Event Code Action Code	005 0 ²⁻⁵ 7-0000 ² 7-00000 <del>0</del> 0-0000000000000000000000000000	
Event Event Code Action Code	Citation Type	Penalty Abate Final
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DAIG		Date Order
		LUMEN COMMENT
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VOIZ-977   Z. Aud transaction A Add	O Other	0.01
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# U. S. Department of Labor Occupational Safety and Health Administration



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# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	008
Number Exposed	. 2	No. Instances	2	REC	
Std. Alleged Vio.	1910.0305( g	)(2)( ii)			

Abatement		itep Abatem	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	
0	- ;			Corrected During	•
				Inspection	

City and Code		
Substance Codes	•	t' <b>e</b> r
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### AVD/Variable Information:

29 CFR 1910.305(g)(2)(ii): Flexible cords were not used in continuous lengths without splice or tap:

On or about January 7, 1999

a) Cutting and Polishing Area

Employees used flexible extension cords to energize hand held polishers. The flexible cord in the extension cords had been cut and spliced in several locations. The removed cord insulation was not replaced at the locations of the splices.

ABATEMENT NOTE: It is permitted to splice hard service flexible cords No. 12 or higher only if spliced so that the splice retains the insulation, other sheath properties, and usage characteristics of the cord being spliced.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

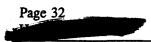
	Penalty	Calculations		A	djustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60		10	
Repeat Factor		0.1		00	v	TO	0.0

ecupation Asso	embler	Employer		
r of Employees 2		Duration	Frequency	
mployee Name			Scottostador tradesiación (1888)	
ddress		Phone	1	

**************************************	
Instance Description: A Hazard B Equipment	C. Location D. Injury/Illness E. Measurements
1 11 Huzard D. Equipmen	C. Location D. Injury/Inness E. Measurements

4. Date	Time	
1/7/99	15:00	

20. Instance Description - Describe the following:a) Hazards-Operation/Condition-Accident



History:

10%

The CSHO observed employees using double-insulated eclectic powered grinders when polishing marble table tops. The tools were energized via several flexible cords. These cords had there ground pins removed and had numerous splices. One of the cords had insufficient strain relief by the plug.

- b) Equipment
- c) Location

Polishing area.

d) Injury/Illness

Electrical shock and/or minor electrical burns not requiring medical treatment.

e) Measurements

The CSHO tested the outlets which were properly grounded.

21. Photo Number	Le	cation on Video	

- 23. Employer Knowledge: The damage to the flexible cord was visible in plain view.
- 24. Comments (Employer, Employee, Closing Conference): The employer recognized the problem and replaced the damaged cord by the following morning.
- 25. Other Employer Information:

26. Classification	n:			
Serious N	Knowledge Y	S or O	Repeat?N	Willful? M

First Repeat		
		Repeat Penalty
	Second Repeat	

### INJURY VIOLATION PENALTY COMPUTATION

SEVERITY: High Medium			ic burns not requiring medical treatment. x
PROBABILITY OF INJURY: Number Exposed: X		_ Weekly _ Nearx_	Partial Shift _x_ Short Fringe
		MENT: GRE	ATERLESSER _x_
ADJUSTMENT FACTORS			
Good Faith: 25% 15% 0% _x Justification:			
The emplo	yer has no	written sa	fety and health programs.

化核合物 自然 植物 精神 机磁性性硬化性

# Justification:

±4 00 ±4 00

120 M

The employer has not been previously inspected by OSHA.

Event Event Code Date	Action Code	Citation Type	Penalty Ahate Final Date Order
03/24/99 Z Add transaction	A Add	O'Other	0.0

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Committee of the control of the cont

# U. S. Department of Larger Occupational Safety and Hear A inistration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	009
Number Exposed	2	No. Instances	2	REC	
Std. Alleged Vio.	1910.0305( g	)(2)( iii)			

Abatement	MultiS	tep Abatem	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	
0				Corrected	
1				During	
L				Inspection	

Substance Codes	
DUDSTANCE CORES	
***************************************	

### AVD/Variable Information:

29 CFR 1910.305(g)(2)(iii): Flexible cords were not connected to devices and fittings so that tension would not be transmitted to joints or terminal screws:

On or about January 7, 1999

# a) Cutting and Polishing Area

Employees used three-wire flexible extension cords to energize hand held polishers. There was no strain relief for the three wires at the plug attachment end of one of the cords.

NOTE: Because abatement of this violation is already documented in the inspection case file, the employer need not submit certification or documentation of abatement of this violation as normally required by 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fa	ctors	Proposed Adjusted
	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	T I occor	01			•	40	
Repeat Factor	L Lesser	01		60	U	10	0.0 ]

Employee Exposure:						
Occupation	Assembler		imployer			
Nr of Employees	2	Ũ	Juration		Frequency	
Employee Name				2.22		
Employee Name Address			* * *	Phone	-	*

istroi Employees 2		AHAUUH	rrequency
Employee Name		a de la companya de	
Address		- Phone	-
Instance Description:	A. Hazard B. Equipme	ent C. Location D. Iniu	ry/Illness E Measurements

				2011 05: 1150	. (1.10.10)
4. Date/Time	* .	2 1 to 1 to 1	1.3600	. 100	

1/7/99 15:00

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO observed employees using double-insulated eclectic powered grinders when polishing marble table tops. The tools were energized via several flexible cords. These cords

had there ground pins removed	and had numerous splices.	One of the cords	had insufficient
strain relief by the plug.	TO DESCRIPTION OF THE OF	COLOR COLLEGE MARKET	Comments of the state of

- b) Equipment (C) Location (C) L

Polishing area.

d) Injury/Illness

Electrical shock and/or minor electrical burns not requiring medical treatment.

e) Measurements

The CSHO tested the outlets which were properly grounded.

21. Ph	oto Number	Location	on Video		

25. Other Employer Information:

Justification:

26. Classification				
Serious	Knowledge	SorO	Repeat?	Willful?
N	Y	0	N	M

First Repeat	Second Repeat	Repeat Penalty
		·

# INJURY VIOLATION PENALTY COMPUTATION

INJURY DESCRIPTION	N: Electric she	ock and n	ninor electri	c burns not requ	iring medical tre	eatment.
SEVERITY: High	Medium	Low	_ Minimal _	_x		
PROBABILITY OF INJ						. <b></b>
Number Expose Frequency: Conferency: Conference Proximity to D	ontinuous	Daily	_ Weekly	_ Partial Shift)	x_ Short	• • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • • •
Stress Factor: Other Factors:	n/a	. 1 01111	14001^_	_ / / / / / / / / / / / / / / / / / / /		
		ASSESSI	MENT: GREA	TER LESSE	R _x_	
ADJUSTMENT FACTO	DRS	=====				
Good Faith:	25% 15% 0%x_	- - -		···	Land Appearance of the Control of th	The second secon
Justin	cation: The employ	er has no	written safe	ety and health pr	rograms.	energy of the second section of the
History:	10%x_ 0%	_			and the second	E LE CEPTE

The employer has not been previously inspected by OSHA.

Sec. 3.

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Event Date		Action Code	Citation Type	Penalty Abate Date	Final Order
03/24/99	Z Add transaction	A Add	O Other	0.0	

# U. S. Department of Labor Occupational Safety and Health Administration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
<u> </u>				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	010
Number Exposed	2	No. Instances	2	REC	
Std. Alleged Vio.	1910.1200( e	)(1)			

Abatement Multi Period PPE Period	iStep Abatements  Plan Report	Final Abatement	Action Type/Dates
30		04/26/99	

Substance Codes	

### AVD/Variable Information:

29 CFR 1910.1200(e)(1): The employer did not develop, implement, and/or maintain at the workplace a written hazard communication program which describes how the criteria specified in 29 CFR 1910.1200(f), (g), and (h) will be met:

On or about January 7, 1998.

a) Cutting and Polishing Area.

The employer did not implement a written hazard communication program at the worksite.

When cutting, shaping, and polishing, employees are exposed to silica (which can cause silicosis). When using glues and/or silicone stone polish, employees are exposed to hazardous chemicals including, but not limited to, trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant). Employees are also exposed to the hazards of propane (a flammable liquid) which is used to power a forklift.

### ABATEMENT NOTE:

A written program should include descriptions of how the criteria for the following will be met:

- 1) Labeling and other forms of warning, including person(s) responsible for ensuring proper labeling, methods of labeling to be used, and procedures to review and update labels when necessary;
- 2) Material Safety Data Sheets, including person(s) responsible, methods of storage and access, and procedures to follow should Material Safety Data Sheets be missing;
- 3) Employee information and training, including person(s) responsible for the training, format of the training, elements of the training program, and procedures for scheduling of the training.

Additionally, a list of hazardous chemicals known to be present in the workplace must be compiled. Methods used to inform employees of the hazards associated with non-routine tasks and to inform contractors of workplace hazards must also be addressed. The written program must be made available upon request.

For additional information, refer to Appendix E of 29 CFR 1910.1200.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations	j.	A	djustm	ent Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good	Faith	History_	Penalty
N Minimal	L Lesser	01		60	· 0	1,54	10	7 Francis (1.0-
Repeat Factor						BSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS	000000000000000000000000000000000000000	

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1	_			٠, -	
60580	Citation	Nr.	02	Iten	n/G

Occupation	Assembler	Employer	
Nr of Employees	2	Duration	Frequency
Employee Name			Procedure - 2000
Address		Phone	

4. Date/Time 1/7/99 15:00

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO observed employees being exposed to dust during marble cutting and polishing operations. The CSHO observed visible dust that settled on surfaces in the area, apparently generated during shaping operations. (On the first day on the site the CSHO observed visible dust in the air that had been created during shaping and/or polishing operations, so it is known that the dust settled as a result of shaping and polishing marble slabs.) The presence of the settled dust demonstrates employee exposure to the dust, which was found to contain 30% silica. [NOTE: Personnel monitoring samples contained no silica. Apparently, the raw material whose dust settled onto the work surfaces apparently had different components than the raw material used on the day of the sampling.]

The employees told the CSHO they use an epoxy glue in the field at times to cement the marble materials during installation. On 1/25/99 the CSHO observed this operation, and detected a strong odor of solvents during the brief application of the glue. The MSDSs for this two part mixture list benzoyl peroxide, iron oxide, and styrene monomer as components. Employees also use a stone polishers whose label lists trichloroethylene as a component.

There is also exposure to propane resulting from use of a propane powered forklift.

CSHO discussions with the owner revealed that the company has no hazard communication program or material safety data sheets. CSHO interview of employees revealed that the employees were unaware of the hazards of silica and had been given no hazard communication training.

NOTE: The employer manufactures only ARTICLES as defined by 1910.1200 so therefore has not violated any of the labeling requirements of 1910.1200 regarding its finished products.

b) Equipment

n/a

c) Location

The dust is generated in the cutting/polishing area. The glue is used in the field.

d) Injury/Illness

Because silica sampling results were under the PELs, the violations is classified as other than serious. Possible effects are minor respiratory irritation and dizziness.

e) Measurements

See OSHA 91 forms.

21. Photo Number	Location on Video
ACCEPTED TO	

- 23. Employer Knowledge: The employer is aware how the employees are exposed to the airborne contaminants.
- 24. Comments (Employer, Employee, Closing Conference):

25. Other Employer Information:

26. Classificati	on:				
Serious	Knowledge	S or O	Repeat?	Willful?	ann caideil a maileil amaile dheann aige a I
N	Y	0	N	N	The second of th

The contract of the contract o

Blogger of pulsary of the property:

Pirst Repeat	Second Repeat	Repeat Penalty
	the state of the s	Property of the second of the second states of

# **ILLNESS VIOLATION PENALTY COMPUTATION**

ILLNESS DESCRIPTIO	N: Minor res	spiratory irr	itation and	or nar	cotic effec	t.		
SEVERITY: High	Medium	Low	Minimal _	<b>x</b>				strik.
PROBABILITY OF INJ				. = = =	=====	=====	: = = = =	: = ·
Number Expo								
Frequency: Co	ontinuous	Daily x	Weekly	Parti	al Shift	_ Short _		
PPF: Not Use	d Used B	v Some Emp	lovees v	llead	Ry All Fm	Noveek	<del></del>	
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	Written Prod	gram With M	inor Deficie	ncies		- ,	¥ 1	
Medical Surv.	: No Program	x Effect	ive Program	n P	artially Effe	ective Pro	oram	
Stress Factor:				· —— ·			9	—
Other Factors		amount of	due are us	eđ				
	. Omy oman	uniount of a	side are us	cu.		•		
FINAL	. PROBABILITY	Y ASSESSMI	ENT: GREA	TER	_ LESSER	_x_		
ADJUSTMENT FACTO	====== ORS			:===:	:	====	:=== <b>=</b>	:=
Good Faith:	25%	•				+ 4		
	15%				A STATE OF THE STA		11.	
•	15% <u> </u>	<del>-</del> .	*			1 1	*	100
Justifi	cation:	<del>-</del>	,					$t^{\star} \cdot t = t$
		er has no w	ritten safe	ty and	health pro	grams.	***************************************	ine . c insut
History:	10% x		•			•	- 10 m	:
	0%						•	77.41
Justifi	cation:	<del></del>						
en en la tradición de la contraction de la contr	The compar	ny has not b	een inspec	ted by	OSHA pro	eviously.		
=========	=====	=====	====	===:	=====	====	====	:==

Date	Action Code	Citation Type	Penalty Abate Final Date Order
03/24/99 Z Add transaction	A Add	O Other	0.0 04/26/99

# U. S. Department of Later Occupational Safety and Health A. inistration



# Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	011
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.1200( f)	)(5)( i)			

Abatement Period PPE	MultiStep Abatem Period Plan			Action Typ	e/Dates
15		04/11	/99		

Substance Codes

### AVD/Variable Information:

29 CFR 1910.1200(f)(5)(i): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the identity of the hazardous chemical(s) contained therein:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees transferred Akemi Plastics Inc. Hi-Speed Hardening Paste from its original container to a screw-cap container. The screw-cap container was not labeling with the identity of the hardening paste. The material contains, among other hazardous ingredients, benzoyl peroxide (an irritant).

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60	0	10	0.0

Nr of Employees 2 Duration Frequency	
Employee Name Address Phone	

Instance Description: A. Hazard B. Equipment C. Location D. Injury/Illness E. Measurements

l.	D.	ıte	/1	'n	ne							
1/	7/	99	1	5:	00	)						

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident அம் விரும் வரு மட்டு நடித்த அருக்கு அடிக்கு அளிக்கு அளிக்கு அளிக்கு அளி

The CSHO observed employees using Part 2 of an epoxy glue system. Employees transferred the material from a squeeze tube (similar to a toothpaste tube) to a small screw-cap container. The label on the tube stated that the material (Akemi Plastics Inc. HiSpeed Hardening Paste) contains benzoyl peroxide. [The MSDS lists other hazardous components such as zinc stearate

and iron oxide.]	The screw-cap	container had no	label whatsoev	er. The C	SHO observ	ved that
the remaining m	aterial was left in	n the container at	iter employees	finished w	orking for t	he day.

NOTE: The employer manufactures only ARTICLES as defined by 1910.1200 so therefore has not violated any of the labeling requirements of 1910.1200 regarding its finished products.

b) Equipment

n/a

c) Location

Cutting and polishing room.

d) Injury/Illness

Because there is no evidence of employee exposure to concentrations of airborne contaminants in excess of allowable amount, the violations is classified as other than serious.

Possible effects are minor respiratory irritation and dizziness.

e) Measurements

n/a

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	٠.	-						٠		 		 			٠	 							• • •	-	٠			٠.	•-		 • • -	 		***	**** F	•	71	<b></b> .	

- 23. Employer Knowledge: The label on the original container alerts users that it is a hazardous material.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

Serious		S or O		Repeat?	Willful?
N	Y	0	N		N

First Repeat	Second Repeat	Repeat Penalty

# **ILLNESS VIOLATION PENALTY COMPUTATION**

SEVERITY: High	Medium	_ Low	Minimalx			
PROBABILITY OF IN	= = = = = = = NJURY:	=====		====		
Number Exp	osed: X					
PPE: Not Us	1 to 8 Housed Used No Writter Written Prov.: No Progran	urs Per Wed By Some E Program ogram With	x_ Weekly Par ek Greater Thar mployees _x Use     x Good Written h Minor Deficiencies fective Program	1 8 Hours pe ed By All Em Program	er Week ployees -	
		l amount	of glue are used.			and the second second
FINA	AL PROBABILI	TY ASSESS	SMENT: GREATER _	LESSER	x	in the second se
ADJUSTMENT FAC	TORS	=====			====	====

Page	42

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Wed Mar 24, 1999 5:42pm Inspection Nr. 301460580 Citation Nr. 02 Item/Group 011

15%	
0%	$\overline{\mathbf{x}}$
ration:	

Justification:

The employer has no written safety and health programs.

History: 10% x_ 0% ____ Justification:

The company has not been inspected by OSHA previously.

C*************************************	The second secon		
Event Code Date	Action Code	Citation Type	Penalty Ahate Final
Date			Date Order
03/24/99 Z Add transaction	A Add	O Other	0.0 04/11/99
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	And the second second		

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### U. S. Department of Labor Occupational Safety and Health Administration



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#### Worksheet

Wed Mar 24, 1999 5:42pm

wed Mar 24, 1999 3:42p	•••			Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name	771				
Type of Violation	O Other	Citation Number	02	Item/Group	012
Number Exposed	2	No. Instances	1	REC	
Std. Alleged Vio.	1910.1200( f)	(5)( ii)			

Abatement	MultiS	tep Abatem	ents	Final	Action Type/Dates
Period	PPE Period	Plan	Report	Abatement	
15				04/11/99	

	· · · · · · · · · · · · · · · · · · ·
	, 5)
***************************************	
Substance Codes	
13ustance Cotes	

#### AVD/Variable Information:

29 CFR 1910.1200(f)(5)(ii): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the appropriate hazard warnings:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees transferred Akemi Plastics Inc. Hi-Speed Hardening Paste from its original container to a screw-cap container. The screw-cap container was not labeling with chemical hazards of the hardening paste. The material contains, among other hazardous ingredients, benzoyl peroxide (an irritant).

ABATEMENT NOTE: Correct labels list both physical (safety) and health hazards.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations		A	djustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
M Minimal	L Lesser	01		60	0	10	. 00
N Minimal	Tr resser	) 01		UU	v	TO.	0.0

\$2000000000000000000000000000000000000
Duration Frequency
Phone
-

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO observed employees using Part 2 of an epoxy glue system. Employees transferred the material from a squeeze tube (similar to a toothpaste tube) to a small screw-cap container.

The label on the tube stated that the material (Akemi Plastics Inc. HiSpeed Hardening Paste) contains benzoyl peroxide. [The MSDS lists other hazardous components such as zinc stearate and iron oxide.] The screw-cap container had no label whatsoever. The CSHO observed that the remaining material was left in the container after employees finished working for the day.

NOTE: The employer manufactures only ARTICLES as defined by 1910.1200 so therefore has not violated any of the labeling requirements of 1910.1200 regarding its finished products.

b) Equipment

n/a

c) Location

Cutting and polishing room.

d) Injury/Illness

Because there is no evidence of employee exposure to concentrations of airborne contaminants in excess of allowable amount, the violations is classified as other than serious. Possible effects are minor respiratory irritation and dizziness.

e) Measurements

n/a

Location on Video
Location on Video

- 23. Employer Knowledge: The label on the original container alerts users that it is a hazardous material.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classificatio	n: Knowledge	Sort	Repeat?	
N	Y	0	N	N

First Repeat	Second Repeat	Repeat Penalty

#### **ILLNESS VIOLATION PENALTY COMPUTATION**

ILLNES	S DESCRIPTIO	N: Minor re	spiratory i	rritation and	l/or narcotic eff	ect.	in in
SEVER	ITY: High	Medium	_ Low	_ Minimal _	_x	2	-
PROBA	====== BILITY OF INJ	URY:		:=====		*= * = = = = :	===
	Number Expos	sed: X					
	Frequency: Co	ontinuous 1 to 8 Hou	_ Daily _x rs Per Week	Weekly Greate	Partial Shift or Than 8 Hours	Short per Week	
	PPE: Not Use	dUsed I No Written	By Some En Program	nployeesx x Good W	Used By All E ritten Program	mployees	
				Minor Deficie		· <del>-</del>	
	Medical Surv.	: No Program	x Effe	ctive Progran	n Partially E	ffective Program	
	Stress Factor:	n/a				-	
e e e e e e e e e e e e e e e e e e e	Other Factors	: Only small	amount of	f glue are us	sed.		160

FINAL PROBABILITY ASSESSMENT: GREATER

**ADJUSTMENT FACTORS** 

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BURER OF OUT OF Good Faith: 25% .....

Justification:

The employer has no written coferation.

AN STACK STATE OF THE STATE OF History: 10% ______ 0% ______ Justification:

of the sample of same

The company has not been inspected by OSHA previously. 

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03/24/99 Z Add transaction	A Add		1 0.0 0 0 7 22/22

## U. S. Department of La' or Occupational Safety and Health. A. inistration



#### Worksheet

Wed Mar 24, 1999 5:42pm

				Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name	774. 1				
Type of Violation	O Other	Citation Number	02	Item/Group	013
Number Exposed	2	No. Instances	2	REC	
Std. Alleged Vio.	1910.1200( g	)(1)			

Abatement MultiStep Abatements Period PPB Period Plan Report	Final Action Type/Dates Abatement
30	04/26/99

Substance Codes

AVD/Variable Information:

29 CFR 1910.1200(g)(1): The employer did not have a material safety data sheet for each hazardous chemical which they used:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Hazardous chemicals for which material safety data sheets were missing include, but are not limited to, silica (which can cause silicosis) whose exposure results from cutting, shaping, and polishing operations; trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) whose exposures result during gluing and polishing operations; and propane (a flammable liquid) whose exposure results from use of a propane powered forklift.

ABATEMENT NOTE: When raw materials are used in such a manner that employees are exposed to hazardous chemicals, the employer must obtain Material Safety Data Sheets from the manufacturers or importers of the materials. For example, if marble slabs contain a percentage of silica, and if employees shape or polish the slabs so that silica dust is liberated into the air, a Material Safety Data Sheet for the material must be obtained.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	Penalty	Calculations	)	A	Adjustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
22.26	1	2 .				101111111111111111111111111111111111111	
N Minimal	L Lesser	01		60	0	10	0.0

Employee Exposure:			Erro V				
Occupation	Assembler		Employe	er e			
Nr of Employees	2		Duration	1	Freque	ncy	
Employee Name				4 - 4 - 4 - 9.	, i e . j 6. <del>*</del>		
Address	•			Phone			.J
				1	1	1.00	

Instance Descri	iption: A	. Hazard B. E	quipment C.	Location D. Inj	ury/Illness E. Mea	surements
•	Additional to the second					an idea in

		79.7	1 , *
4. Date/Time			
1/7/99 15:00	بليان	Q-G-	: : 15

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

The CSHO observed employees being exposed to dust during marble cutting and polishing operations. The CSHO observed visible dust that settled on surfaces in the area, apparently generated during shaping operations. (On the first day on the site the CSHO observed visible dust in the air that had been created during shaping and/or polishing operations, so it is known that the dust settled as a result of shaping and polishing marble slabs.) The presence of the settled dust demonstrates employee exposure to the dust, which was found to contain 30% silica. [NOTE: Personnel monitoring samples contained no silica. Apparently, the raw material whose dust settled onto the work surfaces apparently had different components than the raw material used on the day of the sampling.]

During gluing and polishing operations, employees use glues and polishes which contain styrene monomer, trichloroethylene, and benzoyl peroxide.

Employees use a forklift that is powered by liquid propane.

CSHO discussions with the owner revealed that the company has no hazard communication program or material safety data sheets. CSHO interview of employees revealed that the employees were unaware of the hazards of silica and had been given no hazard communication training.

NOTE: The employer manufactures only ARTICLES as defined by 1910.1200 so therefore has not violated any of the labeling requirements of 1910.1200.

b) Equipment

n/a

c) Location

The dust is generated in the cutting/polishing area. The glue is used in the field.

d) Injury/Illness

Because personal monitoring results did not establish employee exposure to concentrations of airborne contaminants in excess of allowable amounts, the violations is classified as other than serious. Possible effects are minor respiratory irritation and dizziness.

e) Measurements

21. Photo Number	I construct out Market

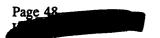
- 23. Employer Knowledge: The employer is aware how the employees are exposed to the airborne contaminants.
- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Classification	n: Knowledge		Repeat?	
N	Y	0	N	N

First Repeat Second Repeat Repeat Penalty		
First Repeat Second Repeat Repeat Penalty		
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#### ILLNESS VIOLATION PENALTY COMPUTATION

ILLNESS DESCRIPTION: Minor respiratory irritation and/or narcotic effect.



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SEVERITY: High Medium Low Minimal _x_
PROBABILITY OF INJURY:
Number Exposed: X
Frequency: Continuous Daily _x_ Weekly Partial Shift Short  1 to 8 Hours Per Week Greater Than 8 Hours per Week  PPE: Not Used Used By Some Employees _x_ Used By All Employees
No Written Programx_ Good Written Program Written Program With Minor Deficiencies
Medical Surv.: No Programx_ Effective Program Partially Effective Program
Stress Factor: n/a
Other Factors: Only small amount of glue are used.
FINAL PROBABILITY ASSESSMENT: GREATER LESSERx =================================
Good Faith: 25%  15%  0% _x_  Justification:
The employer has no written safety and health programs.
History: 10% _x_ 0% Justification:
The company has not been inspected by OSHA previously.

03/24/99	Z Add transaction	A Add	O Other	0.0 04/26/99
Event Date	Event Code	Action Code	Citation Type	Penalty Abate Final Date Order

#### U. S. Department of Labor Occupational Safety and Health Administration



#### Worksheet

Wed Mar 24, 1999 5:42pm

		* •		Inspection Number	301460580
				Opt. Insp. Number	387
Establishment Name					
Type of Violation	O Other	Citation Number	02	Item/Group	014
Number Exposed	2	No. Instances	2	REC	
Std. Alleged Vio.	1910.1200( b	)( 1)			

Abatement Period	MultiS PPE Period	tep Abateme Plan	ents Report	Final Abatement	Action Type/Dates	
30				04/26/99		

7.	- 134 - 124
Substance Codes	

#### AVD/Variable Information:

29 CFR 1910.1200(h)(1): Employees were not provided information and training as specified in 29 CFR 1910.1200(h)(2) and (3) on hazardous chemicals in their work area at the time of their initial assignment and whenever a new physical or health hazard the employees have not been previously trained about was introduced into their work area:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees who use materials such as, but not limited to,

silica (a component of the airborne dust generated during cutting and polishing of marble which can cause silicosis);

trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) [which are used during gluing and polishing operations]; and

propane (a flammable liquid which is used to power a forklift)

were not informed of all of the following:

- 1) The requirements of this section;
- 2) Any operations where hazardous chemicals are present; and
- The location and availability of the written Hazard Communication Program, list(s) of hazardous chemicals, and Material Safety Data Sheets.

Employees were not trained in at least all of the following topics:

- 1) Methods and observances that may be used to detect the presence or release of a hazardous chemical in the work area;
- 2) The physical and health hazards of the chemicals in the work area;
- The measures employees can take to protect themselves, such as specific procedures, appropriate work practices, emergency procedures and personal protective equipment to be used; and
- 4) The details of the Hazard Communication Program, including an explanation of the labeling systems, Material Safety Data Sheets, and how employees can obtain and use the appropriate hazard information.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

B. Equipment C. Location D. Injury/Illness E. Measurements

	Penalty	Calculations		I	Adjustment Fa	ctors	Proposed Adjusted
Severity	Probability	Gravity	GBP	Size	Good Faith	History	Penalty
N Minimal	L Lesser	01		60	0	10	0.0
Repeat Factor		0					

Employee Exposure:				
Occupation		Employer		
Nr of Employees	2	Duration	Frequency	
Employee Name				
Address		Phone		

4. Date/Time 1/7/99 15:00

Instance Description:

20. Instance Description - Describe the following:

a) Hazards-Operation/Condition-Accident

A. Hazard

The CSHO observed employees being exposed to dust during marble cutting and polishing operations. The CSHO observed visible dust that settled on surfaces in the area, apparently generated during shaping operations. (On the first day on the site the CSHO observed visible dust in the air that had been created during shaping and/or polishing operations, so it is known that the dust settled as a result of shaping and polishing marble slabs.) The presence of the settled dust demonstrates employee exposure to the dust, which was found to contain 30% silica. [NOTE: Personnel monitoring samples contained no silica. Apparently, the raw material whose dust settled onto the work surfaces apparently had different components than the raw material used on the day of the sampling.]

During polishing and gluing operations, employees use materials that contain trichloroethylene, benzoyl peroxide, and styrene monomer.

Employees use a liquid propane powered forklift.

CSHO discussions with the owner revealed that the company has no hazard communication program or material safety data sheets. CSHO interview of employees revealed that the employees were unaware of the hazards of silica and had been given no hazard communication training.

NOTE: The employer manufactures only ARTICLES as defined by 1910.1200 so therefore has not violated any of the labeling requirements of 1910.1200.

b) Equipment

n/a

c) Location

The dust is generated in the cutting/polishing area. The glue is used in the field.

d) Injury/Illness

Because personnel sampling results did not establish employee exposure to concentrations of airborne contaminants in excess of allowable amount, the violations is classified as other than serious. Possible effects are minor respiratory irritation and dizziness.

e) Measurements

21. Photo Number	Location on Video
Z1. PROTO NUMOEF	Leading on Aideo

23. Employer Knowledge: The employer is aware how the employees are exposed to the airborne contaminants.

- 24. Comments (Employer, Employee, Closing Conference):
- 25. Other Employer Information:

26. Class Serio	ification	ı: Knowle		Sor	o .		peat?		Villful?
N		Y	·	0		N	* ::	N	<u> </u>

First Repeat	Second Repeat	Repeat Penalty

#### **ILLNESS VIOLATION PENALTY COMPUTATION**

ILLNESS DESCRIF	PTION: Minor re	spiratory in	rritation and/or	narcotic ef	ffect.	41
SEVERITY: High	Medium	Low	Minimalx_		e př	
PROBABILITY OF	INJURY:			=====	:=====	====
Number E	xposed: X					
Frequency	Continuous	_ Daily _x rs Per Week	Weekly l	Partial Shift nan 8 Hours	Short _	
PPE: Not (	Used Used I No Written	By Some Em Program	nployeesx l x Good Writte Minor Deficienci	Jsed By All on Program	Employees	-
Medical Se Stress Fac	urv.: No Program	_x_ Effe	ctive Program _	Partially	Effective Prog	gram
Other Fact	tors: Only small	amount of	glue are used.			, p. 6
FII	NAL PROBABILIT	Y ASSESSI	MENT: GREATER	LESS	ERx	
ADJUSTMENT FA	CTORS		:=====:	_ = = = =	======	====
Good Faith	n: 25% 15% 0%x	<del>_</del>				,
Ju	stification:	_	written safety	and health	programs.	2
Lilatan		-	•	•		
History:	10% _x 0%	<u> </u>		4 · 4 · 4 · 4 · 4 · 4 · 4 · 4 · 4 · 4 ·		1. F. 1. 18. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19
Jus	stification:	<del></del>			رو بعد بعد .	i.
==	The compa	ny has not	been inspected	by OSHA	previously.	
	=	:	======	=====		====

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Occupational Safety and Health Administration

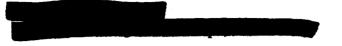
**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 10 Type of Violation: Other

29 CFR 1910.1200(e)(1): The employer did not develop, implement, and/or maintain at the workplace a written hazard communication program which describes how the criteria specified in 29 CFR 1910.1200(f), (g), and (h) will be met:

On or about January 7, 1998.

a) Cutting and Polishing Area.

The employer did not implement a written hazard communication program at the worksite.

When cutting, shaping, and polishing, employees are exposed to silica (which can cause silicosis). When using glues and/or silicone stone polish, employees are exposed to hazardous chemicals including, but not limited to, trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant). Employees are also exposed to the hazards of propane (a flammable liquid) which is used to power a forklift.

#### ABATEMENT NOTE:

A written program should include descriptions of how the criteria for the following will be met:

- 1) Labeling and other forms of warning, including person(s) responsible for ensuring proper labeling, methods of labeling to be used, and procedures to review and update labels when necessary;
- 2) Material Safety Data Sheets, including person(s) responsible, methods of storage and access, and procedures to follow should Material Safety Data Sheets be missing;
- 3) Employee information and training, including person(s) responsible for the training, format of the training, elements of the training program, and procedures for scheduling of the training.

Additionally, a list of hazardous chemicals known to be present in the workplace must be compiled. Methods used to inform employees of the hazards associated with non-routine tasks and to inform contractors of workplace hazards must also be addressed. The written program must be made available upon request.

Occupational Safety and Health Administration

Inspection Number: 301460580

**Inspection Dates:** 01/07/99 - 03/24/99 **Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: (Inspection Site:



## Citation 2 Item 12 Type of Violation: Other

29 CFR 1910.1200(f)(5)(ii): The employer did not ensure that each container of hazardous chemicals in the workplace was labeled, tagged or marked with the appropriate hazard warnings:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees transferred Akemi Plastics Inc. Hi-Speed Hardening Paste from its original container to a screw-cap container. The screw-cap container was not labeling with chemical hazards of the hardening paste. The material contains, among other hazardous ingredients, benzoyl peroxide (an irritant).

ABATEMENT NOTE: Correct labels list both physical (safety) and health hazards.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

	MAN 1997
Date By Which Violation Must be Abated: 04/	11/22
Proposed Penalty:	
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Occupational Safety and Health Administration

**Inspection Number: 301460580** 

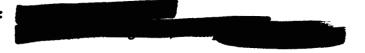
Inspection Dates: 01/07/99 - 03/24/99

Issuance Date: 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



Citation 2 Item 13 Type of Violation: Other

29 CFR 1910.1200(g)(1): The employer did not have a material safety data sheet for each hazardous chemical which they used:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Hazardous chemicals for which material safety data sheets were missing include, but are not limited to, silica (which can cause silicosis) whose exposure results from cutting, shaping, and polishing operations; trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) whose exposures result during gluing and polishing operations; and propane (a flammable liquid) whose exposure results from use of a propane powered forklift.

ABATEMENT NOTE: When raw materials are used in such a manner that employees are exposed to hazardous chemicals, the employer must obtain Material Safety Data Sheets from the manufacturers or importers of the materials. For example, if marble slabs contain a percentage of silica, and if employees shape or polish the slabs so that silica dust is liberated into the air, a Material Safety Data Sheet for the material must be obtained.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Abated: 04	
	/26/99
	0.00
Proposed Penalty \$	

Occupational Safety and Health Administration

**Inspection Number: 301460580** 

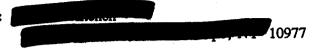
Inspection Dates: 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



### Citation 2 Item 14 Type of Violation: Other

29 CFR 1910.1200(h)(1): Employees were not provided information and training as specified in 29 CFR 1910.1200(h)(2) and (3) on hazardous chemicals in their work area at the time of their initial assignment and whenever a new physical or health hazard the employees have not been previously trained about was introduced into their work area:

On or about January 7, 1998.

a) Cutting and Polishing Area.

Employees who use materials such as, but not limited to,

silica (a component of the airborne dust generated during cutting and polishing of marble which can cause silicosis);

trichloroethylene (a narcotic), styrene monomer (an irritant, central nervous system depressant, narcotic and mutagen), and benzoyl peroxide (an irritant) [which are used during gluing and polishing operations]; and

propane (a flammable liquid which is used to power a forklift)

were not informed of all of the following:

- 1) The requirements of this section;
- 2) Any operations where hazardous chemicals are present; and
- The location and availability of the written Hazard Communication Program, list(s) of hazardous chemicals, and Material Safety Data Sheets.

Employees were not trained in at least all of the following topics:

- 1) Methods and observances that may be used to detect the presence or release of a hazardous chemical in the work area;
- 2) The physical and health hazards of the chemicals in the work area;

Occupational Safety and Health Administration

**Inspection Number:** 301460580 **Inspection Dates:** 01/07/99 - 03/24/99

**Issuance Date:** 03/24/99



#### Citation and Notification of Penalty

Company Name: Inspection Site:



- The measures employees can take to protect themselves, such as specific procedures, appropriate work practices, emergency procedures and personal protective equipment to be used; and
- 4) The details of the Hazard Communication Program, including an explanation of the labeling systems, Material Safety Data Sheets, and how employees can obtain and use the appropriate hazard information.

NOTE: The employer is required to submit abatement certification for this item in accordance with 29 CFR 1903.19.

Date By Which Violation Must be Abated 04/26/99
Proposed Penalty: \$ 0.00

Àrea Director

#### Coverage Information/Additional Comments

The inspection was initiated by a referral from a local government body.

When the CSHO arrived at the site, only two employees were working in the facility. Both of these employees were did identify himself as "foreman" but he indicated he had no production workers. One of the employees authority to take any management action concerning the CSHO's request to do an inspection. This employee telephoned The CSHO spoke with a person who was very reluctant someone at a remote location (the showroom in to provide any information. This person identified herself as and stated that the owner of the company was at a new construction site that had no telephone. She stated that while he had a personal phone number, she did not know this number. She stated that he would only return sometime between 5:00 and 5:30 and that she would leave a message that he call the CSHO. The CSHO then told her that he needed to call his office to speak with his supervisor. The CSHO called the office and spoke with Mr. who provided the CSHO with some instruction on how to proceed. back and told ner that it is OSHA policy to request an immediate inspection and that The CSHO then called if the CSHO did not receive consent, the CSHO would have to apply for a warrant to enter the facility. The CSHO emphasized that this was the reason why it is imperative for Mr. to call the CSHO upon arriving at the answered the call. showroom. The CSHO hung up the telephone, and almost immediately the telephone rung (The CSHO could not hear the conversation, but the party on the line sounded male.) hung up the telephone after a fairly brief conversation and told the CSHO that he was just instructed not to talk to the CSHO about anything dealing with the work. He would not tell the CSHO the name of the person who gave him this order. He also told the CSHO that this person (who he implied was his boss) told him that the CSHO could not use the phone. The CSHO asked him several times who told him this and asked him if this person explicitly told the worker that the CSHO could not use to phone to call back the showroom. He only replied that he was told that the CSHO could not use the phone and he had to follow his bosses orders.

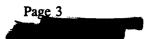
At this point, the CSHO left the site, since the CSHO could not obtain permission form any person to conduct the inspection. The CSHO drove to a public telephone and advised Mr. of the situation. Upon supervisory instruction, the CSHO returned to the OSHA office after which he and Mr. called the showroom at about 4:00. Mr. was at the showroom He stated that no one told him that the CSHO had been at the site and that Mr. explained that management could delegate any person to accompany the CSHO during the inspection. Mr. sked several times if Mr. would allow the inspection to proceed. Mr finally agreed to meet the CSHO at the site the following day at 2:00. Mr. told Mr. that the CSHO would answer his questions about the inspection at that time.

On January 8, 1999, Mr. met the CSHO as promised. During the opening conference the CSHO explained that the referral was originated from a local government agency (but the CSHO did not identify the name of the person who made the referral) and the CSHO explained that the investigation would be limited to employee exposure to silica and any other violations the CSHO observed while evaluating compliance with OSHA regulation relating to silica exposure. Mr. related to the CSHO the background of this operation. He was forcibly relocated when he lost a former site due to widening of a highway. He stated that he applied for a permit to expand the current worksite (which cannot accommodate a showroom) and that his neighbor instigated a series a problems dealing with a local building inspector who has allegedly issued him numerous unwarranted violations. He stated that he was going to attend an evening town meeting this day (January 8) in an attempt to resolve the problem. [Numerous times during the walkaround he asked the CSHO if he "passed" as otherwise he would just move from the site. The CSHO repeatedly explained to him that OSHA does not tell employees they cannot work at a specific site. The CSHO repeatedly explained to him that. at most, if there turned out to be a silica exposure problem, he would just have to upgrade the ventilation equipment.]

#### THE WALKAROUND

The building used to be used by a group of doctors. The house appears to have originally been build as a residence that was converted into a business office. The main floor of the facility is currently used for storage, as is the garage. There is one room which would be called the basement if the building were residential (although this room is on ground level). The operations are done in this room. The operations involve taking marble sheets and shaping them in table tops. This involves cutting the marble sheets, shaping the edges with a router, and polishing the edges (an 8 step process). The saw, the router, and the air-powered grinder all spray water on the marble when in operation, which will diminish airborne silica concentrations.

Sometime in December, 1998, the air compressor failed, which prevented employees from using the water equipped grinder when polishing the marble. According to the employer, the compressor was replaced but then a problem



developed with the water pump. The compressor was finally repaired on the day of the opening conference. The employer stated that while the bulk of the polishing could not be done, the 2 employees were doing some work with an electric powered grinder. This would have created abnormally high concentrations of dust (which may have resulted in the referral). The CSHO did observe a visible layer of dust in the area. The employee who has been working for the employer for 4 years stated that there is dust even when the water is used during the process. Because there is no other way to determine the extent of dust generation, the CSHO arranged to return to the site on a day when all the steps of the process will be active. In particular, sometimes an opening must be cut into the marble slate (which cannot be done with the table saw) and this process might produce the highest concentrations of air contaminants. The employer said he first had to finish polishing the backlog of pieces that built up during the compressor failure. He told the CSHO he would be building a vanity the following week and the CSHO agreed to do the sampling on that day.

#### PLAIN VIEW OBSERVATIONS

The CSHO observed employees powered the electric grinding tools with flexible extension cords that were damaged. See OSHA 1Bs for more information.

The CSHO observed the operation of the machine that cut the marble slabs. The machine resembles a radial saw. Because only the top half of the blade was guarded, the CSHO researched whether such a setup is safe. The CSHO spoke with several manufacturers of stone cutting equipment. All of them stated that their machines only guard the top half of the blade (or, in one case, 210° of the upper portion of the blade. They claimed that the blade is similar to an abrasive wheel in that it has no teeth. The cutting of the marble or other stone is achieved by small diamond studs that are fixed to the blade. These are smooth studs, so touching the blade while it is revolving would be similar to touching an abrasive wheel while it is rotating. The manufacturers stated that the hazard involved with the blade involves the diamond studs which can come loose from the blade and which are usually caught by the guard. Because the CSHO could find no information contradicting this assessment, the guard used on the same must be considered as acceptable.

(NOTE: The CSHO could not contact the manufacturer of the machine in use at the facility. The machine was bought second hand about 20 years ago. It is a Greek machine, with the information on the nameplate written in the Greek alphabet. The employer has no information on the manufacturer of the machine.)

#### **EXPOSURE TO SILICA**

The CSHO took a bulk sample of settled dust on the first day of the walkaround. This material had 30% silica as quartz. The PELs for dust with this amount of quartz is 0.9375 mg/m³ for total dust and 0.3125 mg/m³ for respirable dust.

Most of the dust is generated during the shaping of the sides of the marble tops, which involves rounding the edges using a hand-held grinder. On the day of the personnel sampling, employees performed shaping operations for about 30 minutes. After extensively interviewing the employer and the lead man, the CSHO concludes that on those days when shaping is done, the operation usually takes a longer time. However, the CSHO could not obtain sufficient information to make any judgment concerning the duration of exposure on a typical day.

On the day of the sampling, the type of material being shaping apparently contained no quartz, as none was detected in the samples. The CSHO visually observed numerous different types of marble materials, so evidently the composition of the raw material can vary.

Both employees were sampled, and respirable dust exposure levels for both employees were reported to be 1.1 mg/m³ for the actual duration of sampling. The respective 8 hour TWA exposures are 0.74 mg/m³ and 0.825 mg/m³. At these exposure levels, the amount of quartz allowed to be in the respirable dust before a silica overexposure can occur is 11.5% and 10.1%

While the employees would have been overexposed had the personnel dust samples contained as much quartz as the settled dust, there are three problems involved in interpreting these results. First, the CSHO did not observe what materials generated the settled dust. Second, the employer has no material data sheets for his raw materials that could possibly establish if certain types of the marble raw material are contaminated with silica. Third, the mineral content in the raw materials is probably variable since natural materials mined from the earth do not maintain constant composition. Therefore, resampling at this time would not likely result in greatly different results from the current results.



Rather than resampling, which would be a hit or miss situation, the employer will be cited for Hazard Communication violations. The employer will be required to obtain material safety data sheets for all of his raw materials. This documentation will be reviewed by OSHA during abatement verification. Based upon the material safety data sheets and and changes to the employer's safety and health program regarding silica exposure, OSHA can resample the employees during a followup inspection.

NOISE EXPOSURE

## NOISE EXPOSURE

Cutting operations produces an elevated noise level, but it is of very short duration. The majority of the employee's noise exposure occurs during polishing (between 85 and 90 dBA) and shaping (over 100 dBA). Therefore, only shaping operations substantially influence the average noise level using the 90 dBA threshold.

ON the day of the noise sampling, the helper did most of the polishing and shaping. His exposure was 24% for an 80 dBA threshold and 17% for the 90 dBA threshold. The lead man's exposures were about 5 dBA lower. This suggests that the employee would need to shape for about 3 hours before averaging a 90 dBA exposure using a 90 dBA threshold. However, he would only have to do about an hour of shaping to be covered by the hearing conservation requirements of the OSHA standard.

Because the work that is done on a given day is dependent on customer orders, it is difficult to arrange to sample on a "typical" day. Therefore, rather than wasting time resampling, the employer was advised of the hearing conservation requirements and was told he MUST do noise monitoring to determine what levels of noise employees are typically exposed to. The state consultation service was mentioned. Unless the employer takes appropriate action, OSHA can resample during a followup inspection.

CSHO Signature		•	Date	
	2.55			
Accompanied By				
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## Air Sampling Report

# U.S. Department of Labor Occupational Safety and health Administration



Wed Mar	24, 1999 2	2:22pm																	
MOD	Date	;		Rep	orting ID	02160	00	Inspection	n Number	3014	60580	Samp Numi	Sampling Number 913660452						
Establis	shment	Name	 }																
CSHO	ID	M2	116	Sam	pling Date	01/2	26/99		Shipping Date	e 01/2	28/99		Dat 03/	te Resu 03/99	lt Rec	eived			
Job Tit	le	Lea	d Mai	n				Occupation	on Code			Νυ	ımber	Expose	d 2				
Frequer	icy of I	Exposu	re 1	6 hour	s / week														
Exposu	re Sun	ımary																	
Line Sub No Cod	stance	Rqstd	Smpl Type	Exp Type	Exposure	Units	PEL	Adj	Severity	Citation Information									
NO L.OC	<b>c</b>		TAbe	Type	Level					No Cit	FTA	Over Exp	Eng	PPE	Trag	Med	Other		
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Total Nu	mber of																		
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Air Sampling Report U.S. Department of Labor Occupational Safety and Health Admin. 1. Reporting ID: 216000 2. Inspection No: 301460580 3. Sampling Number: 913660452 4. Establishment Name: 5. CSHO ID: M2116 6. Sampling Date: 01/26/1999 7. Shipping Date: 01/18/1999 8. Date Results Received: 9. Job Title: LEAD MAN 11. Number Exposed: 12. Frequency of Exposure: Exposure Summary 14. 16. 17. 18. 19. 23. Citation Information 15. 20. 21. Line Sub. Reg Smp1 Exp Exposure Units PEL Adj Severity FTA Over Eng. PPE Trng. Med.Other std Туре Level Cit. Code Type Exp. 1.1000 M ¢ G301 R C D G н D 24. Additives (Enter Line No. for those agents contributing to additive effect): 25. Total Number of Lines (13): Analysis Results 26. Analyst's Comments (Including Analytical Method) GRAV 27. CHAIN OF CUSTODY TINI DATE a. Seals Intact? b. Recd in Lab 02/01/1999 c. Recd by Anal. > 02/02/1999 d. Anal. Completed ) 02/11/1999 e. Calo. Checked 1 02/12/1999 f. Supr OK 03/03/1999 28. Sample Submission No 1786 J099 29. Lab Sample No. R 78433 AIR R 78434 ABLNK Time / Type 318.0Min/ P 0.0 30. Analyte Name 31. Analysis Results / 32. Sample Included in Calculations of: G301 Gravimetric Determination 1.1183 O. T BLK 0.605 G302 Sample Weight 0. T Т Sampling Number: 913660452 OSHA-91B (Rev. 1/84) Case File Page TWA calculated on actual time sampled. The I.H. is free to make changes on the Form 91B and submit them directly to IMIS. UNITS of MEASURE are: P = Parts per million M = Milligrams per cubic meter L = Milligrams per liter (urine) F = Fibers per cubic centimeter % = Percent D = Micrograms per deciliter (blood) X = Micrograms Y = Milligrams C = Pico curies per liter ( Radon gas) Analyte codes are chosen by the laboratory. The I.H. should review them for applicability. if there are any questions

call the laboratory for appropriate analyte codes (ie. 163 uses fume analyte codes when the IH may have sampled for dust).

Sampling Number: 913660452 Electronic Copy

Occupational Safety and Health Admin. Air Sampling Report U.S. Department of Labor 2. Inspection No: 301460580 3. Sampling Number: 913660452 1. Reporting ID: 216000 4. Establishment Name: 5. CSHO ID: M2116 6. Sampling Date: 01/26/1999 7. Shipping Date: 01/28/1999 8. Date Results Received: 9. Job Title: LEADMAN 11. Number Exposed: 12. Frequency of Exposure: Exposure Summary 18. 23. Citation Information 14. 16. 17. 19. 20. Smo 1 Exposure Units PaL 140 FIA Over ang. PPE Iring, Med.Other Line Sub. Exp Ad i Severity Rea Туре Cit. Exp. Code std Type C G 24. Additives (Enter Line No. for those agents contributing to additive effect): 25. Total Number of Lines (13): **Analysis Results** 26. Analyst's Comments (Including Analytical Method) ID142 27. CHAIN OF CUSTODY INIT DATE The Det. Lim for 9010 Air samples is 10 micrograms. a. Seals Intact? b. Recd in Lab 02/01/1999 c. Recd by Anal. 02/16/1999 d. Anal. Completed 02/25/1999 e. Calc. Checked 03/01/1999 f. Supr OK 03/03/1999 28. Sample Submission No 1786 1099 29. Lab Sample No. R 78436 AIR R 78437 ABLNK 318.Min/ P Time / Type 31. Analysis Results / 32. Sample Included in Calculations of: 30. Analyte Name Silica, Crystalline Quartz (as Qua 0.000000 % 0.000000 BLNK OSHA-91B (Rev. 1/84) Sampling Number: 913660452 Case File Page TWA calculated on actual time sampled. The I.H. is free to make changes on the Form 91B and submit them directly to IMIS. UNITS of MEASURE are: P = Parts per million M = Milligrams per cubic meter L = Milligrams per liter (urine) % = Percent D = Micrograms per deciliter (blood) F = Fibers per cubic centimeter C = Pico curies per liter ( Radon gas) X = Micrograms Y = Milligrams

Analyte codes are chosen by the laboratory. The I.H. should review them for applicability. if there are any questions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may have sampled for dust).

The Sampling and Analytical Error (SAE) is the current value for the specific chemical(s) and should be used for further calculations:

Silica, Crystalline Quartz (as 0.19

ND The results are below the detection limits.

Sampling Number: 913660462 Electronic Copy

03-03-99 , 91:09PM P05

## **Air Sampling Worksheet**

## U.S. Department of I bor Occupational Safety and Heal. A ministration



MOD	Date	Reporting ID 0216000	Inspection Number 1301460580	ber		Sampling Number	013	660452					
Establishment Na	me	0210000	301400300			Sampling Date 01/26/99		Shippin	g Date				
Person Performing	Sampling (Sig	nature)	<del> </del>	Print Last N		Paul Madura		CSHO		M2116			
	•								· · ·				
Employee (Name,	Address, I elep	none Number)				Exposure a. Number b. Duration 1+ year							
						Frequency	16 l	ours / we	ek				
			<del></del>			Weather Cond	litions	Photo(s)					
Job Title Lead	Man		Occupation Cod	e				Y					
PPE (Type and E	ffectiveness)					Pump Checks and Adjustments							
Job Description, (	Operation, Work	Location(s), Venti	lation and Controls						Con	r'd			
Pump Number: 1	0445			Sampling Da	ıta								
Lab Sample Nun	nber												
Sample Submissi Number	on	112096-38											
Sample Type		P			•								
Sample Media		pre-weighed	PVC filter										
Filter/Tube No.		I786					:						
Time On/Off		8:36	12:53										
		11:54	14:53	w.									
Total Time (in minutes)		(198)	(120)										
Flow Rate □I/mm □ c	c/min		1.7										
Volume (in liters)			541										
Net Sample Weig (in mg)	ght							***	,e				
Analyze Samples			amples to Include in		tc. C	alculations	<del></del> _			<del></del>			
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<del></del>					<u> </u>								
				1.7			-						
Interference and IH The material in us	Comments to Lab e is marble, which	is calcium	Supporting Samples	,e		Chain of Cu	stody	Initials	N	Date			
Interference and IH Comments to Lab  The material in use is marble, which is calcium carbonate. If there is any silica in the bulk sample at all, please analyze for silica on the filter would help document a hazard communication violation.  Supp			a. Blanks 112096-36 (filter J099	Seals Intact Received in Received by	Y								
•		b. Bulks 1798-1			Analysis Co Calculation Supervisor								
						Page		OI .					

Pre-Sampling Calil	oration Rec	ords							FLOW	AVERAGE		
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Post-Sampling Cal	bration Re	cords		<u>/                                      </u>			-					
Location/T	& Alt.		Flow Rate Ca			er.		3	1734 1735	1734 1735		
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## Air Sampling Worksheet

## U.S. Departmen f Labor Occupational Safety and how dministration



1. Reporting ID		2. Inspection Number 301 460	er 580		3. Sampling Number						
4. Establishment Name		1_/2 (			5. Sampling Da	te	6. Shi	pping Date			
7. Person Performing Samp	ling (Signature)			8.	Print Last Name		9. C	SHO ID			
10. Employee /Name Addr	one Number	er)			14. Exposure	a. Nun	nber	b. Duration			
					c. Frequency			<u> </u>			
· · · · · · · · · · · · · · · · · · ·	- ,				15. Weather Co	nditions	16.	Photo(s)			
								Υ			
11. Job Title LEAD MAN			12. Occupation	Code							
13. PPE (Type and Effective			······································		17. Pump Chec	ks and Adj	justme	nts			
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18. Job Description, Operat	ion, Work Location(s),	Ventilation, and Con	trols				-				
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19. Pump Number: 103	445		Sampling Data			·············					
20. Lab Sample Number	<del>(                                    </del>		T								
21. Sample Submission Number	11,2096 -38					a		is a second order of the second order			
22. Sample Type	11,2010-70					SEPP The color of a Symbol Service of the service o					
23. Sample Media											
24. Filter/Tube Number	7786 -					and the street supply and the street supply opening		, at trade to Science a seeker a consiste trade to the seeker seeker and the			
25. Time On/Off	836	12:53			The state of the s						
	11:54	14:1153									
26. Total Time (in minutes)											
27. Flow Rate											
<i>Vmin cc/min</i>					The second secon			, , type era, - spannera ky communistratym o and Superior.			
(in liters) 29. Net Sample Weight						-					
(in mg)  30. Analyze Samples for:	31. Indicate Which	Samples to Include	in TWA. Ceiling et	c. Calculation	<u>(, (, ))</u>	.}					
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## Air Sampling Report

# Occupational Safety and Lahrn Administration



Wed	Mar 24, 1999	2:05pm										<del></del>					
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Job	Title	He	lper					Occupat	ion Code			Nι	ımber	Expos	ed 0		
Free	quency of	Exposu	ire 1	6 hou	rs / week												
Exp	osure Su	mmary															
Line	Substance Code	Rqstd	Smpl Type	Exp Type	Exposure Level	Units	PEL	Adj	Severity	Citatio	on Info	rmation					
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D. Atment of Labor Air Sampling Report 1. Reporting ID: 216000 2. Inspection No: 301460580 3. Sampling Number: 913660460 4. Establishment Name: 5. CSHO ID: M2116 6. Sampling Date: 01/26/1999 7. Shipping Date: 01/18/1999 8. Date Results Received: 9. Job Title: HELPER 11. Number Exposed: 12. Frequency of Exposure: Exposure Summary 16. 17. 19. 20. 23. Citation Information 14. 15. 18. 21. 22. Units PEL FTA Over Eng. PPE Trng. Med.Other Line Sub. Req Smp1 Exp Exposure Ad; Severity Туре Type Level Cit. Exp. 1.1000 M G301 C C υ В G н Н 24. Additives (Enter Line No. for those agents contributing to additive effect): 25. Total Number of Lines (13): Analysis Results 26. Analyst's Comments (Including Analytical Method) GRAV 27. CHAIN OF CUSTODY INIT DATE a. Seals Intact? b. Recd in Lap 02/01/1999 c. Recd by Anal. ; 02/02/1999 d. Anal. Completed ; 02/11/1999 e. Calc. Checked 1 02/12/1999 f. Supr OK 03/03/1999 28. Sample Submission No J086 R 78432 AIR 29. Lab Sample No. Time / Type 371.0Min/ P 31. Analysis Results / 32. Sample Included in Calculations of: 30. Analyte Name Gravimetric Determination 1.0618 G301 T

TWA calculated on actual time sampled. The I.H. is free to make changes on the Form 91B and submit them directly to IMIS.

Case File Page

#### UNITS of MEASURE are:

OSHA-91B (Rev. 1/84)

P = Parts per million

Sample Weight

M = Milligrams per cubic meter L = Milligrams per liter (urine)

F = Fibers per cubic centimeter

% = Percent

Sampling Number: 913660460

0.67 T

D = Micrograms per deciliter (blood)

X = Micrograms

Y = Milligrams

C = Pico curies per liter ( Radon gas)

/of

Analyte codes are chosen by the laboratory. The I.H. should review them for applicability. if there are any questions call the laboratory for appropriate analyte codes (ie. ICP uses fume analyte codes when the IH may have sampled for dust). Sampling Number: 913660460 Electronic Copy

Date Air Sampling Report U.S. Department of Labor Occupational Safety and Health Admin. 1. Reporting ID: 216000 3. Sampling Humber: 913660460 2. Inspection No: 301460580 4. Establishment Name: 5. CSHO ID: M2116 6. Sampling Date: 01/26/1999 7. Shipping Date: 01/28/1999 8. Date Results Received: 11. Numper Exposed: 9. Job fitle: HELPER 12. Frequency of Exposure: Exposure Summary 14. 15. 16. 17. 19. 21. 22. 23. Citation Information Line Sub. Exposure Units PEL Ad i Severity FTA Over Eng. PPE Trng. Med.Other Req Smp1 Exp Cit. Exo. Code std Type Туре Level В C D Α В С н 24. Additives (Enter Line No. for those agents contributing to additive effect): В C 25. Total Number of Lines (13): Analysis Results 26. Analyst's Comments (Including Analytical Method) ID142 27. CHAIN OF CUSTODY INIT DATE a. Seals Intact? The Det. Lim for 9010 Air samples is 10 micrograms. b. Recd in Lab 02/01/1999 c. Recd by Anal. 02/16/1999 d. Anal. Completed 02/25/1999 e. Calc. Checked 03/01/1999 f. Supr OK E 03/03/1999 28.Sample Submission No J086 29. Lab Sample No. R 78435 AIR Time / Type 371.0Min/ P 30. Analyte Name 31. Analysis Results / 32. Sample Included in Calculations of: 9010 Silica, Crystalline Quartz (as Qua 0.000000 % Sampling Number: 913660460 OSHA-91B (Rev. 1/84) Case File Page TWA calculated on actual time sampled. The I.H. is free to make changes on the Form 91B and submit them directly to IMIS. UNITS of MEASURE are: P = Parts per million M = Milligrams per cubic meter L = Milligrams per liter (urine) F = Fibers per cubic centimeter % = Percent D = Micrograms per deciliter (blood) C = Pico curies per liter ( Radon gas) Y = Milligrams X = Micrograms

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Silica, Crystalline Quartz (as

ND The results are below the detection limits. Sampling Number: 913660460 Electronic Cony

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#### Air Sampling Worksheet - U.S. Department of Labor ministration Occupational Safety and Healt!

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Thu Jan 28, 1999 2:30pm Reporting ID 0216000 Date Inspection Number 301460580 Sampling Number MOD 913660460 Shipping Date 01/28/99 Sampling Date **01/26/99** Establishment Mame Print Last Name CSHO ID M2116 Person Performing Sampling (Signature) a. Number b. Duration Fundavee (Name, Address, Telephone Number) Information Frequency 16 hours / week Weather Conditions Photo(s) Job Title Helper Occupation Code PPE (Type and Effectiveness) Pump Checks and Adjustments Job Description, Operation, Work Location(s), Ventilation and Controls Cont'd Pump Number: 10478 Sampling Data Lab Sample Number 112096-57 Sample Submission Number Sample Type Sample Media pre-weighed PVC filter J086 Filter/Tube No. 8:45 Time On/Off 14:56 Total Time (in minutes) 371 1.7 Flow Rate ☐ cc/min □l/mm 631 Volume (in liters) Net Sample Weight Indicate Which Samples to Include in TWA, Ceiling, etc. Calculations Analyze Samples for: Т Silica (respirable) Initials Date Interterence and IH Comments to Lab
The material in use is marble, which is calcium
carbonate. If there is any silica at all in the bulk sample,
please analyze the filter for the presence of silica as
such presence would help support a hazard communication
violation (even if there is no over-exposure to the PEL). Supporting Samples Chain of Custody a. Blanks 112096-36 (filter J099) N Seals Intact Received in Lab Received by Analyst b. Bulks Analysis Complete 1798-1 Calculation Checked Supervisor Ok'd. Case File Page

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## Air Sampling Worksheet







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## Air Sampling Report



## U.S. Department of Labor Occupational Safety and Lath Administration



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# Air Sampling Worksheet

## U.S. Department of Labor Occupational Safety and Heal Iministration



MOD	Date	Reporting ID 0216000	Inspection Num 301460580		Sampling Number 401104328									
Establishment Name							ts _q	g Pat	g Date					
Person Performi	ing Sampling (Sig	gnature)		Print Last			ID	M2116						
Employee (Name, Address, Telephone Number) BULK SAMPLE							Exposure Information			Duration 1 year				
	Frequency 24 hours / week													
	Weather Con	ditions	Photo(s)											
Job Title Sha	ıper													
Job Title Shaper Occupation Code  PPE (Type and Effectiveness)							Pump Checks and Adjustments							
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Sample Media		n/a												
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Interference and IH Comments to Lab The material is settled dust generated during the cutting and polish of marble slabs.			a. Blanks		Seals Intact		<del></del>	N						
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Air Sampling Report U.S. Department of Labor Occupational Safety and Health Admin. 1. Reporting ID: 216000 2. Inspection No: 301460580 3. Sampling Number: 913660460 4. Establishment Name: 5. CSHO ID: M2116 6. Sampling Date: 01/26/1999 7. Shipping Date: 01/28/1999 8. Date Results Received: 11. Number Exposed: 9. Job Title: HELPER 12. Frequency of Exposure: Exposure Summary 23. Citation Information 16. 19. 14. Smpl Exposure Units PEL Ad i Severity FTA Over Eng. PPE Trng. Med.Other Line Sub. Rea Exo Exp. Type C \$103 C 24. Additives (Enter Line No. for those agents contributing to additive effect): 25. Total Number of Lines (13): Analysis Results 27. CHAIN OF CUSTODY 26. Analyst's Comments (Including Analytical Method) ID142 INIT DATE a. Seals Intact? b. Recd in Lab 02/01/1999 c. Recd by Anal. 02/16/1999 d. Anal. Completed 02/25/1999 03/01/1999 e. Calc. Checked f. Supr OK 03/03/1999-28.Sample Submission No 1798-1 R 78438 BULK 29. Lab Sample No. Time / Type 0.0 Min/ B 31. Analysis Results / 32. Sample Included in Calculations of: 30. Analyte Name POL = 10/(32) = 0.3125 (A) \$103 Silica (Quartz, Total) 30,0000 % = 30/32 = 0.937 (DÃ Sampling Number: 913660460 OSHA-91B (Rev. 1/84) TWA calculated on actual time sampled. The I.H. is free to make changes on the Form 91B and submit them directly to IMIS. UNITS of MEASURE are: M = Milligrams per cubic meter L = Milligrams per liter (urine)

P = Parts per million

D = Micrograms per deciliter (blood) F = Fibers per cubic centimeter % = Percent

Y = Milligrams C = Pico curies per liter ( Radon gas) X = Micrograms

Analyte codes are chosen by the laboratory. The I.H. should review them for applicability. if there are any questions call the laboratory for appropriate analyte codes (ie. 1CP uses fume analyte codes when the IH may have sampled for dust).

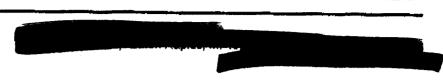
Bulk samples are analyzed to provide an estimate of the composition of the material submitted. The results reported should be considered semi-quantitative only.

Sampling Number: 913660460

Electronic Copy



### MATERIAL SAFETY DATA SHEET



2/22/99

1- COMMERCIAL NAME: Hi Speed Hardener Paste - all colors

### 2- HAZARDOUS INGREDIENTS:

CHEMICAL NAME

1. Benzoyl Peroxide

2. N/A

3. N/A

4. N/A

CAS NUMBER

94-36-0

N/A

N/A

N/A

**QUANTITY** in %

40-50

N/A

N/A N/A

3- HAZARDS IDENTIFICATION:

Health Hazard : Irritant - target organs - eyes, skin, respiratory tracks

NUZOS PEC -IN \$15

### 4- FIRST AID MEASURES :

- Change any soiled clothing immediately.

- In case of eye contact: open eyelids as far as possible and flush with large quantities of water for at least fifteen minutes. Call a physician preferably an eye specialist.
- In case of skin contact: physically remove the product and wash skin thoroughly with soap and water. Consult a physician if skin imitation occurs.
- In case of swallowing: don't attempt to make him/her vomit. Call a physician and (or) hospitalize the patient immediately.
- In case of inhalation ; remove the patient from the contaminated area. Call a physician if aftereffects occur.

### 5- FIRE-FIGHTING MEASURES:

### 5-1 Fire-extinguisher types:

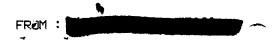
- Use : chemical foam, CO2, powder. Where the fire is of major proportions, water spray may also be used.

### 5-2 Specific fire and explosion risks:

Heat or contamination may cause hazardous decomposition creating oxides of carbon and biphenyl .Toxic and under Combustion may produce flammable vapors.

### 5-3 specific protective measures during firefighting :

Firefighting personnel should be equipped with insulated, autonomous respiratory protection equipment.



COMMERCIAL NAME: Hi Speed Hardener Paste - all colors

### 6- ACCIDENTAL RELEASE MEASURES :

### 6-1 Individual protection:

Wearing of suitable protective clothing and protective equipment for face/eyes.

Use NIOSH-approved organic vapor respirator with dust, mist and fume filters to reduce potential for inhalation exposure if use conditions generate vapor, mist or aerosol and adequate ventilation(outdoor or well ventilated area) is not available.

6-2 Environmental protection : Please see § 12

### 6-3 Decontamination procedures:

- Contain spilt material in order to avoid its transfer to sewers or rivers and streams.
- Physically remove the material.
- Cover material with sand, earth or any other similar absorbent material in order to soak product up. The resulting mix may then be shoveled into cans and removed for disposal (Please see § 13).

### 7- HANDLING AND STORAGE:

### 7-1 Handling:

- Inform personnel of risks associated with the product, the precautions to be taken and procedures to follow where an accident occurs.
- Observe personal hygiene rules to avoid contact with eyes and skin.
- Avoid inhaling vapors produced by the material when heated.
- General ventilation in the area should be sufficient (fan-driven). Where vapors could possibly escape into the air in the workplace, local specific means of ventilation will be necessary.
- Install showers and eye baths ("fountain" type).
- Wash hands thoroughly at beginning of every work break and at the end of the working day,
- Work stations and the general working area must be kept perfectly clean.
- Avoid exposure to the material of persons having suffered from eczema or still suffering from any skin condition, wound, cut or irritation.

### 7-2 Storage:

- Keep the material hermetically sealed in its original packaging, protected from humidity and at a temperature below 100°F / 38°C in a well-ventilated storage facility.
- Ensure that the floor of the storage area is impermeable and concave in profile in order to provide effective containment.
- Reproduce labeling on all new packs where original packaging is divided.

### 8- EXPOSURE CONTROLS/PERSONAL PROTECTION:

### 8-1 Exposure controls:

Not available.

### 8-2 Personal protection:

- respiratory protection: respirator, if needed (look at §6)
- gloves : YES (rubber)
- eye protection : YES

Do not mix work clothing and normal clothing. Wash hands thoroughly at beginning of every work break and at the end of the working day.



COMMERCIAL NAME : Hi Speed Hardener Paste - all colors

### 9- PHYSICAL AND CHEMICAL PROPERTIES:

Physical state: Paste Color: Red, white or black Odor: Slight Sweet pH: not established Flash point: 200°F / 93°C

Specific gravity: 1.20

Solubility:

- in water: at 68°F / 20°C: 1% by weight

- in solvents: soluble in many organic solvents: benzene hydrocarbons and

chlorinated hydrocarbons, acetone, phthalates

### 10- STABILITY AND REACTIVITY

### 10-1 Dangerous decomposition by-products:

- These are non-existent if storage and handling rules are followed (please see also § 5-2).
- Excessive heating over long periods causes product degradation.

### 10-2 Hazardous reactions with:

Exothermic reaction with products containing active hydrogen, strong oxidizers, strong bases, metal salts, reducing agents and accelerators.

### 11- TOXICOLOGICAL INFORMATION:

Effects on eyes: may be moderately irritating

Effects on skin: repeated or prolonged single exposure may cause imitation to the skin. May cause a cutaneous allergic reaction in predisposed individuals. It appears unlikely that any danger is attached to absorption of quantities of the product through the skin following prolonged single exposure.

Effects of inhalation: May cause respiratory tract irritation. Effects on ingestion: low toxicity for a single oral dose.

### 12- ECOLOGICAL INFORMATION:

Based on data for one or more similar products:

- Ecotoxicity: not known
- Biodegradability: yes

### 13- DISPOSAL CONSIDERATIONS

Waste Disposal:

Tha EPA Hazardous Waste number is D003

Container Disposal

Empty containers may not be disposed of unless any remaining material adhering to the internal walls has been removed. Empty containers should be disposed of in accordance with all applicable laws and regulations.



COMMERCIAL NAME: Hi Speed Hardener Paste - all colors

### 14- TRANSPORT INFORMATION:

DOT Regulation: not regulated Internal label: H0072000

### 15- REGULATORY INFORMATION:

### U\$ Federal Regulation

Toxic Substances Control Act (TSCA):

All components are included in the EPA Toxic Substances Control Act Chemical Substance Inventory.

OSHA Hazard Communication Standards (CFR29)

Health (§1910.1200): Irritant

Fire: (§1910.1200): Not Hazardous

Exposure Limits(§1910.1000): PEL - TWA: 5mg/m³

EPA SARA Title III

Section 302: Extremely Hazardous Chemicals: none

EPA SARA Title III

Section 311/312: Hazard Categories: Immediate Health Hazard, Delayed Health Hazard

EPA SARA Title III

Section 313: Toxic Chemicals:

Benzoyl Peroxide: C.A.S. 94-36-0 40-50%

Please refer to any other national measures or regulations that may be relevant to the product...

### 16-OTHER INFORMATION:

**HMIS Ratings:** 

Resin

- Health:

2

- Flammability:

2

- Reactivity:

Ratings Key: 4 = Highest hazard, 0 = Lowest hazard, * = Chronic Health Hazard

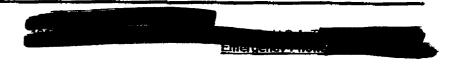
### **REVEALING MODIFICATION:**

Revised: 2/22/99 Supersedes sheet: 2/19/99 This sheet provides a complement to the product use instructions but does not replace them. The information it contains is based on our current knowledge of the product concerned at the date of drafting. That information is given in good faith and does not in any circumstances remove from the user his duty to be aware of and to follow all legal regulations and statutes covering his activities. The user takes sole responsibility for application of safety measures covering the use of the product he is aware of. We also draw the user's attention to the risks attached to any use of the product for applications for which it was not designed.





### MATERIAL SAFETY DATA SHEET



2/22/99
1- COMMERCIAL NAME: Buff Flowing Marble Cement

### 2- HAZARDOUS INGREDIENTS :

 CHEMICAL NAME
 CAS NUMBER
 QUANTITY In %

 1. Styrene
 100-42-5
 10-20

 2. N/A
 N/A
 N/A

 3. N/A
 N/A
 N/A

 4. N/A
 N/A
 N/A

### 3- HAZARDS IDENTIFICATION /DATA:

Exposure Limit: (styrene) - PEL - 100ppm, TLV-STEL - 200ppm

NO CONTRO VATUUS - 14919

Health Hazard :Irritant (styrene) - target organs - eyes, skin, respiratory tracks.

Fire Hazard - flammable(styrene) - class Ic.

Explosion Hazard - hazardous (styrene) - at elevated temperatures, such as in fire.

### 4- FIRST AID MEASURES :

- Change any soiled clothing immediately.

- In case of eye contact: open eyelids as far as possible and flush with large quantities of water for at least fifteen minutes. Call a physician ,preferably an eye specialist.
- In case of skin contact: physically remove the product and wash skin thoroughly with soap and water. Consult a physician if skin irritation occurs.
- In case of swallowing : don't attempt to make him/her vomit. Call a physician and (or) hospitalize the patient immediately.
- In case of inhalation: remove the patient from the contaminated area. Call a physician if aftereffects occur.

### 5- FIRE-FIGHTING MEASURES:

### 5-1 Fire-extinguisher types:

- Use : chemical foam, CO2 powder or any Class B extinguishing agent. Where the fire is of major proportions, water spray may also be used.

### 5-2 Specific fire and explosion risks:

Heat or contamination may cause hazardous polymerization. If polymerization takes place in closed container, there is the possibility of violent rupture of the container. Product vapors may form an explosive mixture in air. 5-3 Specific protective measures during firefighting:

Firefighting personnel should be equipped with insulated, autonomous respiratory protection equipment.

COMMERCIAL NAME: Buff Flowing Marble Cement

### 6- ACCIDENTAL RELEASE MEASURES:

### 6-1 Individual protection:

Ventilation - General ventilation is required during normal use.

Respiratory protection - If TLV or PEL listed in this data sheet is exceeded, then suitable respiratory protection must be worn to prevent overexposure.

Protective Gloves - Wear appropriate impervious gloves to prevent skin contact.

Eye Protection - Wear face shield or protective safety goggles.

Other protective Equipment - Wear protective clothing to prevent skin contact.

### 6-2 Environmental protection: Please see § 12

### 6-3 Decontamination procedures:

- Remove all sources of ignition, ventilate area.
- Contain spilt material in order to avoid its transfer to sewers or rivers and streams.
- Physically remove the material.
- Cover material with sand, earth or any other similar absorbent material in order to soak product up. The resulting mix may then be shoveled into cans and removed for disposal (Please see § 13).

### 7- HANDLING AND STORAGE:

### 7-1 Handling:

- Inform personnel of risks associated with the product, the precautions to be taken and procedures to follow where an accident occurs.
- Observe personal hygiene rules to avoid contact with eyes and skin.
- Avoid inhaling vapors produced by the material .
- General ventilation in the area should be sufficient (fan-driven). Where vapors could possibly escape into the air in the workplace, local specific means of ventilation will be necessary.
- Install showers and eye baths ("fountain" type).
- Wash hands thoroughly at beginning of every work break and at the end of the working day.
- Work stations and the general working area must be kept perfectly clean.
- Avoid exposure to the material of persons having suffered from eczema or still suffering from any skin condition, wound, cut or irritation.

### 7-2 Storage:

- Keep the material hermetically sealed in its original packaging, protected from humidity and at a temperature below 100°F / 38°C in a well-ventilated storage facility.
- Ensure that the floor of the storage area is impermeable and concave in profile in order to provide effective containment.
- Reproduce labeling on all new packs where original packaging is divided.

### 8- EXPOSURE CONTROLS/PERSONAL PROTECTION:

### 8-1 Exposure controls:

Not available.

### 8-2 Personal protection:

- respiratory protection : respirator, if needed (look at §6)
- gloves : YES (rubber)
- eye protection : YES

Do not mix work clothing and normal clothing. Wash hands thoroughly at beginning of every work break and at the end of the working day.

### **COMMERCIAL NAME:** Buff Flowing Marble Cement

### 9- PHYSICAL AND CHEMICAL PROPERTIES:

Physical state: Liquid Color: milky yellow Odor: Strong, aromatic pH: not established Flash point: 89°F / 31°C Specific gravity: 1.70

Solubility:

- in water : at 68°F / 20°C : insoluble

- in solvents: soluble in many organic solvents: benzene hydrocarbons and chlorinated hydrocarbons, acetone, phthalates, methanol, ethanol e.t.c.

### 10- STABILITY AND REACTIVITY

### 10-1 Dangerous decomposition by-products:

- These are non-existent if storage and handling rules are followed (please see also § 5-2).
- Excessive heating over long periods causes product degradation.

### 10-2 Hazardous reactions with:

Exothermic (polymerization) reaction with strong acids and strong oxidizers.

### 11- HUMAN EFFECTS AND SYMPTOMS OF OVEREXPOSURE:

Effects on eyes: may be moderately imitating, causing pain, tearing, reddening, swelling and itching.

Effects on skin: repeated or prolonged single exposure may cause irritation to the skin. May cause a cutaneous allergic reaction in predisposed individuals. Styrene can penetrate the skin and may cause systemic effects similar to those identified under acute inhalation exposure.

Effects of inhalation: May cause respiratory tract imitation, may cause drowsiness, nausea, headache, fatigue and dizziness.

Effects on ingestion: Causes irritation in the mouth, stomach tissue and digestive track. Vomiting may cause aspiration of the solvent resulting chemical pneumonia.

### 12- ECOLOGICAL INFORMATION:

Based on data for one or more similar products :

- Ecotoxicity: not known
- Biodegradability: yes

### 13- DISPOSAL CONSIDERATIONS

Waste Disposal:

If discarded, this material should be treated as hazardous waste based on the characteristic of ignitability (D001)

Container Disposal

Empty containers may not be disposed of unless any remaining material adhering to the internal walls has been removed. Empty containers should be disposed of in accordance with all applicable laws and regulations.



COMMERCIAL NAME: Buff Flowing Marble Cement

### 14-TRANSPORT INFORMATION:

DOT Regulation: not regulated internal label: H0005020

### REGULATORY INFORMATION :

### US Federal Regulation

Toxic Substances Control Act (TSCA):

All components are included in the EPA Toxic Substances Control Act Chemical Substance Inventory.

OSHA Hazard Communication Standards (CFR29)

Health (§1910.1200): Irritant

Fire: (§1910.1200): Flammable-class 1c

Exposure Limits(§1910.1000): PEL - 100ppm, TLV-STEL - 200ppm

EPA SARA Title III

Section 302: Extremely Hazardous Chemicals: none

EPA SARA Title III

Section 311/312: Hazard Categories: Immediate Health Hazard, Delayed Health Hazard, Fire Hazard,

EPA SARA Title III

Section 313: Toxic Chemicals:

Styrene - C.A.S. 100-42-5

10~20%

Please refer to any other national measures or regulations that may be relevant to the product.

### 16- OTHER INFORMATION:

HMIS Ratings:

Resin

- Health:

2

- Flammability:

3

- Reactivity:

4

Ratings Key: 4 = Highest hazard, 0 = Lowest hazard, * = Chronic Health Hazard

### **REVEALING MODIFICATION:**

Revised: 2/22/99

Supersedes sheet: 8/5/93 This sheet provides a complement to the product use instructions but does not replace them. The information it contains is based on our current knowledge of the product concerned at the date of drafting. That information is given in good faith and does not in any circumstances remove from the user his duty to be aware of and to follow all legal regulations and statutes covering his activities. The user takes sole responsibility for application of safety measures covering the use of the product he is aware of. We also draw the user's attention to the risks attached to any use of the product for applications for which it was not designed.

O2/99

T-852 P.02 F-433 AKEM 5265 LINTON TRAIL EATON RAPIDS, MI 48827

Latest Revision Date...06/29/93

BUFF FLOWING

Print Date........08/05/93

EMERGENCY PHONE NUMBER: 1-800-424-9300 < 

PRODUCT IDENTIFICATION SECTION 1

PRODUCT NAME OR NUMBER..... WSBFLO

TRADE NAME OR CHEMICAL NAME..... BUFF FLOWING

SYNONYMS................. Buff flowing marble cement

FORMULA..... NA

CHEMICAL FAMILY..... Unsaturated polyester

MOLECULAR WEIGHT....... NA

HEALTH - 2, FIRE - 3, REACTIVITY - 2 HMIS RATING.....

PREPARED BY....... Sarah C. Henry

HAZARDOUS INGREDIENTS / HAZARD DATA SECTION 2

CHRMICAL WAKE(S)	CAS NUMBER	\$ VT	TLV-TWA	PEL	SEC. 313
CALCIUM CARBONATE	001317-65-3	55 - 65	long/h3 fof. Dust	NA 15/5	Bo
STYRENE HOWOMER	000100-42-5	10 - 20	50 PPK	50 PPN :100/200/6	oyes
UNSATURATED POLYESTER RESIN	HITTUR-E -	20 - 30	KA	ЯÀ	No
FUNED SILICA	112945-52-5	<1.0	6 HG/H3 FOT DUST	<b>NA</b> :	No
TITARIUM DIOXIDE	013463-67-7	<1.0	10 MG/M3 TOT DUST	10 HG/H3 TOT DUST	Bo
ARTFOR IBON OXIDE	001309-37-1	<0.1	10 MG/M3 (FUMES)	NA 70	No

Information for mixtures is based on constituent MSDS which are available upon request. (Minus Proprietary Trade Names).

PHYSICAL DATA SECTION 3

BOILING/MELTING POINT @760 mm Hg Approximately 145°C VAPOR PRESSURE mm Hg @200 C..... 4.5 mm Hg for styrene

VAPOR DENSITY (Air = 1)..... Heavier than air

PERCENT VOLATILE BY VOLUME (%).. 29.6 VOC (1bs/gal)...... 2.19

SPECIFIC GRAVITY OR BULK DENSITY 1.72 SOLUBILITY IN WATER..... Slight

EVAPORATION RATE (BuAc = 1).... 0.5 for styrene APPEARANCE...... Beige liquid

Typical styrene monomer odor

SECTION 4 FIRE AND EXPLOSION HAZARD DATA

FLASH POINT OF (Test Method).... 89°F SFCC

AUTOIGNITION TEMPERATURE...... 490°C for styrene

FLAMMABILITY LIMITS IN AIR (% V) For styrene - LEL = 1.1 UEL = 6.1

EXTINGUISING MEDIA...... Water fog, carbon dioxide, dry chemical,

foam SPECIAL FIRE FIGHTING PROCEDURES

Firefighters and others exposed to vapors or products of combustion should wear self-contained breathing apparatus and

full protective clothing.

Page 1

P02

### SECTION 4

### FIRE AND EXPLOSION HAZARD DATA

CONTID

UNUSUAL FIRE & EXPLOSION HAZARDS

Styrene polymerizes readily at elevated temperatures of fire conditions. Closed containers could rupture violently when exposed to heat or flame.

### HEALTH HAZARD DATA * EFFECTS OF OVEREXPOSURE SECTION 5

SKIN CONTACT..... Prolonged or repeated contact of product with skin may cause irritation, and could result in dermatitis.

EYE CONTACT..... May cause Severe irritation, redness, tearing, blurred vision.

INHALATION......May cause mucous membrane irritation and upper respiratory discomfort. High concentrations may cause headache, nausea, central nervous system effects including dizziness, weakness, fatigue, and possible unconsciousness and even death.

INGESTION......Can cause gastrointestinal irritation, nausea, vomiting and diarrhea.

### CHRONIC EFFECTS

OF OVEREXPOSURE.... Overexposure to styrene has apparently been found to cause the following effects in laboratory animals: liver abnormalities, kidney damage and lung damage.

CARCINOGENICITY.... The International Agency for Research on Cancer (IARC) has classified styrene as possibly carcinogenic

(Class 2B). The IARC 2B classification is not based on significant new evidence that styrene might be a carcinogen, but on a revised IARC classification scheme

and new data on styrene oxide.

### TOXICOLOGICAL

TEST DATA......Oral LD50 (rat) - 5000 mg/kg for styrene Dermal LD50 has not been determined for styrene

### EMERGENCY AND FIRST AID PROCEDURES SECTION 6

SKIN......Wash affected areas with water while removing contaminated clothing. Launder contaminated clothing before reuse.

EYES......Flush eyes with generous amounts of water for at least 15 minutes. Get immediate medical attention.

INGESTION.... If swallowed, DO NOT INDUCE VOMITING. Dilute with water and call a physician immediately. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.

INHALATION... Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

### SECTION 7 REACTIVITY DATA

PRODUCT STABILITY..... Stable

Conditions to Avoid..... Heat and direct sunlight

CHEMICAL INCOMPATIBILITY..... Strong acids, peroxides and oxidizing

agents.

HAZARDOUS DECOMPOSITION PRODUCTS Carbon monoxide, carbon dioxide, organic acids, and low molecular weight hydrocarbons.

Page 2

BUFF FLOWING

SECTION 7 REACTIVITY DATA CONT'D

HAZARDOUS POLYMERIZATION..... May occur

Conditions to Avoid...... Sunlight, open flame and contamination

CORROSIVE TO METAL..... No OXIDIZER..... No

SECTION 8 SPECIAL PROTECTION INFORMATION

RESPIRATORY PROTECTION.....NIOSH/MSHA approved organic vapor respirator

when vapors are generated above the permissable

limit.

VENTILATION......Good general mechanical ventilation and local

exhaust.

PROTECTIVE CLOTHING.......Gloves, coveralls, aprons, boots - as necessary

to prevent skin contact.

EYE PROTECTION......Safety glasses with side shields or chemical

goggles.

OTHER PRECAUTIONS..........Wash thoroughly before eating, drinking, or

smoking. A safety shower and eye wash facility

should be available.

SECTION 9 ENVIRONMENTAL DATA

SPILL OR LEAK PROCEDURES...... Remove all sources of ignition such as

flares, flames, and electrical sparks. Ventilate area. Absorb spill with an absorbent material such as sawdust, vermiculite, sand or floor absorbent,

place in closed container. Wash area with soap and water.

WASTE DISPOSAL METHOD..... Dispose of only in a facility permitted

for the disposal of hazardous wastes, in accordance with federal, state, and local

regulations.

HAZARDOUS WASTE 40CFR261..... Characteristic waste - Ignitable

SECTION 10 SHIPPING DATA

Differ IV

D.O.T. PROPER SHIPPING NAME.... Resin solution

D.O.T. HAZARD CLASS..... Flammable liquid

PACKING GROUP..... III
POISON CONSTITUENT..... NA

BILL OF LADING DESCRIPTION..... NMFC 100-D ITEM 150110 CLASS 55

UN/NA CODE..... UN 1866

SECTION 11 SUPPLIER INFORMATION

While Akemi, Inc. believes the data set forth herein are accurate as of the date hereof. Akemi, Inc. makes no warranty, expressed or implied, with respect thereto and expressly disclaims all liability for reliance thereon. Such data are offered solely for your consideration, investigation, and verification.

From



** MATERIAL SAFETY DATA SHEET **
Information Phone #: (517)-663-8191

AXSON NORTH AMERICA, INC. 1611 HULTS DRIVE EATON RAPIDS, MI 48827

"BPO"

Latest Revision Date...04/13/98

HI SPEED HARDENER PASTE ALL COLORS

Print Date.....04/16/98

EMERGENCY PHONE NUMBER: 1-800-424-9300 P. (: 15039, 11083, 11084 11081, 11082

SECTION 1

### PRODUCT IDENTIFICATION

11078, 11079

PRODUCT NAME OR NUMBER..... HSP

TRADE NAME OR CHEMICAL NAME.... HI SPEED HARDENER PASTE - ALL COLORS

FORMERLY KNOWN AS.....

SYNONYMS..... BPO paste

FORMULA..... NA

CHEMICAL FAMILY..... Organic peroxide

MOLECULAR WEIGHT..... NA

HMIS RATING...., REACTIVITY - 1

PREPARED BY..... Eric Archer

### SECTION 2 HAZARDOUS INGREDIENTS / HAZARD DATA

CHEMICAL NAME(S)	CAS NUMBER	\$ WI	TLV-TWA	PEL	SEC.313
BENZOYL PEROXIDE	000094-36-0	50	5 PPM RESP	5 PPM RESP	Yes
BUTYL BENZYLPHTHALATE	000085-68-7	28	NA	na	Yes
ZINC STEARATE	000557-05-1	APPROX 1	10 PPM TOT. DUST	10 PPM TOT, DUST	Yes
RED IRON OXIDE	001332-37-2	0-2(red)	5 MG/M3 (FUMES)	NA 15/5	No
WATER	007732-18-5	18 - 25	na	NA 10	Мо

Information for mixtures is based on constituent MSDS which are available upon request. (Minus Proprietary Trade Names).

### SECTION 3

### PHYSICAL DATA

BOILING/MELTING POINT @760 mm Hg NA VAPOR PRESSURE mm Hg @20° C.... NA

VAPOR DENSITY (Air = 1)..... 10.8 (solvent)

PERCENT VOLATILE BY VOLUME (%).. <20 by weight

VOC (lbs/gal)..... < 2.16 SPECIFIC GRAVITY OR BULK DENSITY 1.2

SOLUBILITY IN WATER..... Slight; ph not applicable

EVAPORATION RATE (Buac = 1).... Negligible

APPEARANCE..... Smooth paste colored red, black or white.

ODOR..... Slight sweet odor

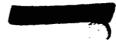
### SECTION 4

### FIRE AND EXPLOSION HAZARD DATA

FLASH POINT °F (Test Method).... >200°F (SETA)

AUTOIGNITION TEMPERATURE..... NA





### HI SPEED HARDENER PASTE ALL COLORS

### SECTION 4

### FIRE AND EXPLOSION HAZARD DATA

CONT'D

FLAMMABILITY LIMITS IN AIR (% V)

EXTINGUISING MEDIA.....

Water fog, carbon dioxide, dry chemical, foam

SPECIAL FIRE FIGHTING PROCEDURES

Evacuate area and apply water from a safe distance. Spray water on the nearby peroxide containers to prevent overheating. After fire, wait until area is cooled to room temperature before attempting clean up. Firefighters and others exposed to vapors or products of combustion should wear self-contained breathing apparatus and full protective clothing.

UNUSUAL FIRE & EXPLOSION HAZARDS

Peroxides and decomposition products are flammable and can ignite with explosive force if confined. Material is difficult to ignite, but with continued exposure to flames, it will burn slowly and sluggishly

### SECTION 5 HEALTH HAZARD DATA * EFFECTS OF OVEREXPOSURE

SKIN CONTACT.....Prolonged skin contact may cause skin irritation and redness.

EYE CONTACT..... May cause eye irritation.

INHALATION...... May cause irritation of the nose, throat and lungs.

INGESTION..... May cause toxic effects.

MUTAGENICITY..... Negative in Ames test for 78% wet BPO. Benzoyl peroxide has given negative results in several skin painting studies (mice) and positive results in one such study (mice). The relevance of the positive result, if any, to humans is not known at this time.

TOXICOLOGICAL

TEST DATA.....Oral LD50 - (rat) - >5000 mg/kg for benzoyl peroxide

### SECTION 6

### EMERGENCY AND FIRST AID PROCEDURES

SKIN......Wash affected areas with water while removing contaminated clothing. Launder contaminated clothing before reuse.

EYES.....Flush eyes with generous amounts of water for at least 15 minutes. Get immediate medical attention.

INGESTION....If swallowed, DO NOT INDUCE VOMITING. Dilute with water and call a physician immediately. Never give fluids or induce vomiting if the victim is unconscious or having convulsions.

INHALATION... Move to fresh air. Aid in breathing, if necessary, and get immediate medical attention.

### SECTION 7

### REACTIVITY DATA

PRODUCT STABILITY..... Unstable

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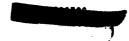
### HI SPEED HARDENER PASTE ALL COLORS

MI OF DEC MANDENER AND IN THE STREET OF THE			
SECTION 7 RE	ACTIVITY DATA CONT'D		
Conditions to Avoid CHEMICAL INCOMPATIBILITY			
HAZARDOUS DECOMPOSITION PRODUCTS			
HAZARDOUS POLYMERIZATION Conditions to Avoid			
OXIDIZER			
SECTION 8 SPECIAL PR	OTECTION INFORMATION		
RESPIRATORY PROTECTIONNIOS when limi	H/MSHA approved organic vapor respirator vapors are generated above the permissable t.		
VENTILATION			
nece	gloves, coveralls, aprons, boots - as ssary to prevent skin contact.		
EYE PROTECTIONSafe	ty glasses with side shields or chemical les.		
OTHER PRECAUTIONSWash smok	thoroughly before eating, drinking, or ing. A safety shower and eye wash facility ld be available.		
SECTION 9 ENVI	RONMENTAL DATA		
SPILL OR LEAK PROCEDURES  WASTE DISPOSAL METHOD	flares, flames, and electrical sparks. Ventilate area. Absorb spill with an absorbent material such as sawdust, vermiculite, sand or floor absorbent. Use non-sparking tools to place spilled material in closed containers. Wash area with soap and water. Dispose of only in a facility permitted for disposal of hazardous wastes, in		
HAZARDOUS WASTE 40CFR261	accordance with federal, state, and local regulations. Charactistic waste - reactive.		
SECTION 10 S	HIPPING DATA		

D.O.T. PROPER SHIPPING NAME.... Not Regulated by land D.O.T. HAZARD CLASS..... None PACKING GROUP..... None

CLASS 85





ITEM 2

### HI SPEED HARDENER PASTE ALL COLORS

SECTION 10 SHIPPING DATA CONT'D

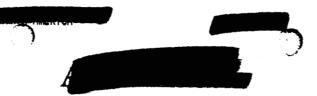
POISON CONSTITUENT........... NA
BILL OF LADING DESCRIPTION..... NMFC 43940

UN/NA CODE..... NA

SECTION 11

### SUPPLIER INFORMATION

while ... believes the data set forth herein are accurate as of the date hereof. Inc. makes no warranty, expressed or implied, with respect thereto and expressly disclaims all liability for reliance thereon. Such data are offered solely for your consideration, investigation, and verification.



### Safety Data Sheet according to 91/155/EWG

Compiled on: August 29, 1995 Modified on: May 21, 1996

Page 1 of 3

1. Name of substance/preparation and company Silicon & Stone Polish Stone Polish - silicone based

Ref: 15360 15361 Art. No. 10842, 10843, 10844

Akemi Erich Höntsch GmbH

Lechstraße 28 90451 Nürnberg

Phone +49-911-642960 Tclcfax +49-911-644456

### 2. Composition/constituents

Product based on reactive silicone oils, containing lubricating and polishing agents.

Dangerous constituents:

CAS no. EC no. Index-No. Name Danger symbol Content R.phrases 650-001-02-5 test benzine 10 % 10

### 3. Possible dangers

Flammable.

[OSHA= COMBUSTIBLE]

### 4. First aid measures

Contact with the eves:

rinse thoroughly with water, see ophthalmologist.

Contact with the skin:

changed soaked clothing immediately, wash thoroughly with water and soap.

in high concentration provide fresh air. If breathing stops provide artificial respiration. Bring unconscious people in a lateral position and see a physician.

Swallowing:

do not incite to vomit, bring people in a quiet position and see a physician.

### 5. Measures to fight fires

Suitable extinguishing medium: distinguishing powder, foam, CO2

Unsuitable extinguishing medium; complete water jet

Further information: In case of a fire dangerous decomposition products are generated which may be dangerous to to human health. Special protective clothes and air-independent breathing equipment are recommended. Cool down containers with water.

### 6. Measures in case of unintended release

Prevent from entering sewage water, sewage pipes, bodies of water or the ground. Provide sufficient ventilation. Keep those not concerned with emergency measures away. Strictly avoid open flames and sources of heat and ignition. Remove remaining substance with chemical binding agents, possibly dry sand. Use a shovel or a spatula. Keep in sealed containers. For further information see disposal.

### AKEMI Safety Data Sheet according to >1/155/EWG

Stone Polish - silicone based

Art.No. 10842, 10843, 10844

### 7. Handling and storage

Store containers dry and tightly sealed in a cool, well-ventilated room. Sufficient ventilation, possibly suck off air while handling the product. Avoid contact with skin and eyes and inhalation of vapors. At higher temperatures flammable vapors are generated which can form an explosive mixture with air. Keep away from open flames, sources of heat and ignition - Do not smoke.

### 8. Limits for exposition and personal safety requirement

If occasional contact of the product with the hands cannot be avoided, protective gloves (PVC or rubber) or suitable protective creams should be used. Provide sufficient ventilation of working place. Wearing a face protection or protective spectacles is recommended.

Keep away from foodstuffs, fodder, tobacco etc. Wash hands and use a protective cream before taking breaks and finishing work. Keep working clothes separately. Change soiled or soaked clothing.

### 9. Physical and chemical properties

Form:

liquid

Colour:

milky white

Smell:

typical

Density:

approx. 1.02 g/cm³ (20°C)

Aqueous solubility:

insoluble (20°C)

Flash point:

approx. 47°C

ITOP = CLASS I

### 10. Stability and reactivity

Dangerous reactions with strong oxidizing agents.

### 11. Toxicological data

No information on special toxic reactions.

### 12. Ecological data

Prevent from entering sewage water, sewage water pipes and the ground.

### 13. Information on disposal

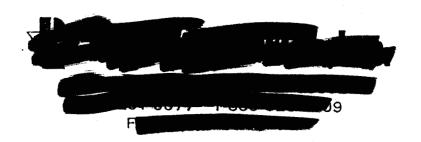
Observe local regulations. Dispose as special waste or as hazardous waste collected by the local authorities. Waste code no. 55 326.

Contaminated packing is to be completely emptied; After cleaning the packing can be recycled. Empty packing which is contaminated with substances listed in the regulations on dangerous goods should be clearly marked. They are not subject to the packing regulations but are considered special waste.

P 1 0

NOTES INFO

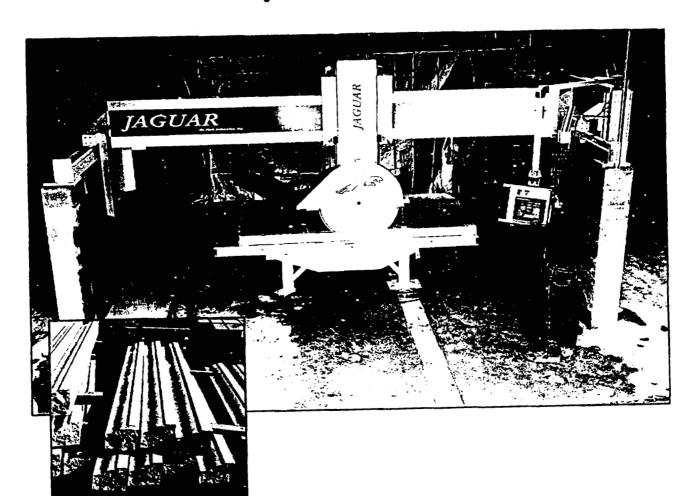
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Date: 2/16/99	Fax Number:
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Company:	# of Pages Including Cours Share
U.S DEPT OF LABOR	# of Pages Including Cover Sheet:
ENCLOSED IS A PICTURE O	FOUR JAGUAR SAW WITH
THE BLADE SHROUD	IN PLACE AFTER SPEAKING
WITH THE PROJECT MA	NAGIER FOR JAGUAL
SAWS I HAVE LEARN	VED THAT OUR SHROUD
15 DESIGNED TO COVER	210° OF THE BLADE -
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SORRY FOR THE MISINFOR	MATION VIA THE PHONE
ALSO INCLUDED IS AN EX	AMPLE DRAWING OF A
JAGUAR SHROUD FOR A 36"	BLADE. THE SMALLER
SHROUDS APE OF THIS S	AME SHAPE - DESIGN
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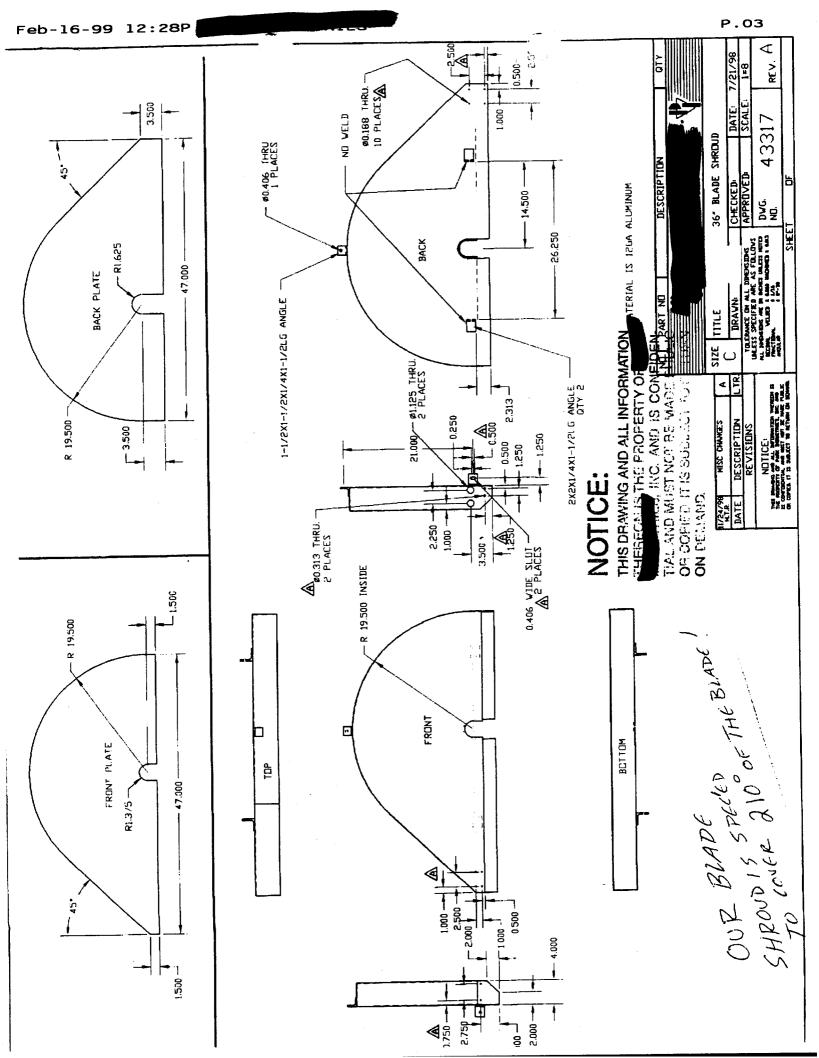
## **Gantry Diamond Saw**



Straight Line Profiling

The premier gantry diamond saw for the "high precision ... high production" fabricator

7-E Bonna Bonna



## Diamond dry cutting saws

particularly high degree of operating safety, thanks to the direct welding method used, or to the laser Diamant-D Diamond Dry Cutting Saws offer a welding of the segments on to the steel core. All Diamant-D saws are

Diamant-D diamond dry cutting saws, we recommend subjected to an extensive examination, which guaran-So that you can get the best results from your tees an extremely high standard of quality. to observe the following instructions: Clean the flange before mounting saw.
 The direction of rotation of the arrow on the saw must

correspond with the direction of rotation on the machine. 4. Do not apply pressure-the weight of the machine will wear and even possible destruction of the tool. Ensure 3. A saw which is out of balance means increased that the tolerances are not exceeding 0.15 mm.

suffice. Increased pressure means increased wear

5. The saw should be used in a gentle reciprocating manner especially when used on hard materials 6. Avoid tilting the saw when cutting.

7. If there is a loss of correct cutting action (this will be

8. Avoid changing wheels before the saw is worn out, noticeable by a high degree of spark llying), sharpen the saw by using an abrasive material such as sand stone, by means of further cutting actions. as this results in a shorter service life.

Only use machines which have an approved salety guard

 Despite the higher safety factor of this tool, always wears protective goggles and clothes (leather aprons). 11. Observe national safety regulations.

# Permissible rotation speeds at 80 m/s

115 · 13.280 230 (12.20 300 180 8.500 350	RPM	6.640 6.360 5.450
13.280 12.220 12.220 8.500	Dia. of saw (mm)	230 380
115 · 125 · 180	RPM	13.280 12.220 8.500
ă	Dia of saw (mm)	. 85 89

17062839005

9031987608

14:03

T- MOMON

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1494

Note

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**INAMAID** 

MR.

3- Pristau Marbit TACLETUPS
SHOWROOM OPENS AT 10:00

2:00 PM

BOSEN IN 12 YEARS; HAD TO MAVE (-7-99 WHEN 59 WIDENED, STYTE PUND CURRENT LOCATION.

RECENSIY MANON NOXT DOOR. WANT TO BUTEND BUILDING,

NEIGHBOR IS UNHAPPY, KNOW., GOT SUMMONS.

10% LUT STONE

90% = INTERNAN DOSION - HAR OTHER CONTRACTORS

EMPLOYO OUT COUNTER

POUSSE

PROPORT ON WORNITE

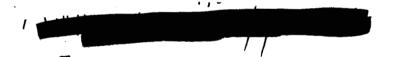
SHAVING STUFF WORMS WITH COMPROSSUR THAT WAS OUT. 8 STAGOS OF POLISTING.

— BLOWN BOTORD CORIST MAS. ROPAN MAN HAST
MOMISING TO PIX.

1-7-99

CUT - SHAPE - ROUTER ] HADE - USE POLISH

DUST RESPIRATOR -1 STRAP



4 YEARS
COMPRESSON BROWE CHRISTMS TIMES
MOSTLY USE HOD
ALWAYS IS DUSTY - IN WINTER WE
SOO MONE DUST

GRINDING MANES MOST DUST
HITCHEN TAME 2-3 DAYS.

NEXT WEEK OUT

TO MORNOW POLISHING

NORMANY GRIND DRY.

3)

NO TNG IN HAZAMD 1-7-99 USE EPCKY GLUE TO COMOUT STONE

WILLSON RG85 AR 700

EXTENSION CONTIS SLICUTI TENSION RULIOF GROWN PIN MISSING DOLALE INSULATED CONTI

> Front Fran Byr 1005 29 day NRA

8c-81 de Per184126 SLM - 08412567 -STANTS SANDUG & LLTTLE,

TO PILL THE SEAMS (BUFF FLUENC")

hour AD STONE INC.

MANASSAS VIA 703-369-1236

"FLAMMARIE MIXTURE"

STYNENE MUNUMER, INHISTED

Ahrml STURE-PULISHING PLUID #10 2012

- TRICHLURO ETYLENE

ACHUNE RY E.G. ZIMMERMAN CO PITTS BURGH

PROPANTS (PORMUPT/ 400 gm conTynors)

ARVMI PLASTICS FORC

EATON RAPIDS MI 48827

577-663-8191

111-SPOOD HARDONING PASTG

BUNZOYL PEROXIDE PASTG

PURTA CABLE MUNER 1700 HOUT GUN

CALSN 822119 5cm 8412567

SQUIGOUS CLOSS TO BLOOD BEFORD LOTHAUN STOPS

10 MIN

THON CLUING PLOTOS TODOSTON.

10 MITH A12 CUN (3- PRONG)

11:35-12:35 LVNCH (BOLPAL CUNTALLY)

DAYNG

1:00 Anison CUT, THEN POLISONG WITH NO 1920 (BDGS) - HAND TOOL USON UN APPONDED DUST MISA (1 STRAP) (ABOUT 1' LONG

THEN HERPOR DUST THE PULSANG WITH THE

130 LUMP CRINDING (GRUNING A STANT UN THE UNGU) — USOS VACUUM PUR DUST (DRY BRITITION ABOUT 5' BRUTIT 10 MINUTES: THS 15 THE DUSTY

PRUTIT 10 MINUTES. THIS IS THE DUSTY

JUB. APPEN THIS IN DUNG, POUPON

CONTINUES SMOOTHING. DUNG AT 2:10

FURHURT: CLARK MUD GC 5 15 TAPE LP 5'N G127-0730-6330 FA

MF - 2.5 HOURS SIMULUS

MACHINE 25 YEMS CLD-NOT BOUDET FROM MFG. 2-9-99 NO 15 A GROBE MACHINE

SAW DOUS NOT CUT HANDS BUT IT CUTS MARKET DIAMOND BLADE

BLADE IS NOT SHARP

(UTTING INDCOSS IS THE PLAND OF STANTS

WON'T CUT BREAD

OVER 1/8" BLADE

BLADES

800-423-1634

VIC INTERNATIONAL

[16" BLADE - SILENT CORE

STUNE MASTER

18186 CUI

KUGBR/ JABUAR 1 1/-14" 16"-36"

BLADE SHROUD UPPER 50/0

GUARD TO DEPROCT \$20

CAN STICK PINGOR ON BLAPE, RUSE IT MYSELF.

BLADE HAS DIAMOND SEGMENTS.

GAP DETUBEN SEGMENT, WHICH SCOOPS

1720.

SCEMENTS CAN SCHOOT OUT, LANELY, SNICL SCHOOT TOWARDS STONE OF TOP OF BLADE. WE REPAIR LOTS OF BLADES, MUTYS HAVE CIVEN THE SEUMENTS WHICH CRACHED OFF.

IMPURITORS:

EUROPGAN IMPURITORS

ATLANTA (CONTACT:

THE TOTAL TO THE

2-16-99

2-11-99

BLAPE GVARD

MPG -

Enforcement -V. Maye RT E Exit 14A-Common Distriction of the state Spordie Geretin Grand Marble / Rock D Employees are not wearing mests or offer responds - No ventilation / femeral ventilation Cutting Slots & grinding / polishing 2 - workers A5149040673

CO-OWNER 2.00

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